

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2005 8:00 am
Secretary of State

01-24-2005 90053 026 ****61.25

DOCUMENT # 743394 1. Entity Name HIDDEN OAKS ESTATES ASSOCIATION, INC.					
Principal Place of Business 4710 STONERIDGE TRAIL SARASOTA, FL 34232			Mailing Address POST OFFICE BOX 7754 SARASOTA, FL 34278-7754		
2. Principal Place of Business 4902 HIDDEN OAKS TRAIL		3. Mailing Address Suite, Apt. #, etc.			
City & State SARASOTA FL		City & State Suite, Apt. #, etc.		4. FEI Number 59-2138257	
Zip 34232-3040		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MITCHELL, DAVID 22 SOUTH LINKS AVE STE 300 SARASOTA, FL 34236			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ADANG, PETER 4939 HIDDEN OAKS LANE SARASOTA, FL 34232	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DILGES, BRUCE R. 4731 STONERIDGE TRAIL SARASOTA, FL 34232-3032
☐ Change ☒ Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARDEN, DONNA M 4940 HIDDEN OAKS LANE SARASOTA, FL 34232	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PAYNE, DAVID W. 4663 STONERIDGE TRAIL SARASOTA, FL 34232-3030
☐ Change ☒ Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WYATT, JERRY 4962 HIDDEN OAKS TRAIL SARASOTA, FL 34232	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACKSON, JEFFREY S. 4701 STONERIDGE TRAIL SARASOTA, FL 34232-3032
☐ Change ☒ Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MELIN, R. FREDERICK P.O. BOX 15612 SARASOTA, FL 34232	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PONITZ, KEITH P. 4828 STONERIDGE CIR SARASOTA, FL 34232-3007
☐ Change ☒ Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COMPARETTO, MARIO L 4647 STONERIDGE TRAIL SARASOTA, FL 34232	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
☐ Change ☐ Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HATCHER, BENJAMIN T 4803 STONERIDGE TRAIL SARASOTA, FL 34232	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
☐ Change ☐ Addition					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>R. FREDERICK MELIN</u> <u>1/11/05</u> <u>941-346-6000</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone					