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NONPROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 748121

1. Corporation Name
HIDDEN ACRES HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3944 HIDDEN ACRES CIR N FT MYERS FL 33903 US	PO BOX 4436 NORTH FORT MYERS FL 33903 US



2. Principal Place of Business 21 3879 Hidden Acres Circle	2a. Mailing Address 26 Suite, Apt. #, etc.	3. Date Incorporated or Qualified 07/19/1979
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	4. FEI Number NOT APPLICABLE
23 City & State n. Fort Myers, FL	28 City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
24 Zip 33903 25 Country USA	29 Zip 33903 30 Country USA	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
PARVEY, ALLAN 3854 HIDDEN ACRES CIRCLE NORTH FT MYERS FL 33903	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WEDLER, BREN 3818 HIDDEN ACRES CIR N. FT. MYERS FL 33903	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	President Allan Parvey 3854 Hidden Acres Circle n. Fort Myers, FL 33903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP STUMP, JR P 3773 HIDDEN ACRE CR NO FT MYERS, FL 00000 33903	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	Brent Wedler VP 3818 Hidden Acres Circle n. Fort Myers, FL 33903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CARRASQUILLO, ANN 3812 HIDDEN ACRES CIR NO FT MYERS FL 33903	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BYRD, DIANNE 3884 HIDDEN ACRES CIR NO FT MYERS, FL 00000 33903	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	Treasurer Davio Robbins 3879 Hidden Acres Circle n. Fort Myers, FL 33903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOREL, ANN 3793 HIDDEN ACRES CIR N FT MYERS FL	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	Director Tim DeLaney 3901 Hidden Acres Circle n. Fort Myers, FL 33903
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Davio Robbins** 2-21-99 941-337-1341
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/98)