5/20/99 6-7585 FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 754561

(9)

HIDDEN WOODS OF DEER CREEK, INC.

FILED
May 20 1997 8:00am
Secretary of State

- 1 40,8111 18081		B	

Principal Place of Business		Mailing Address	Mailing Address		(ANNIN INNN AIRDE PINN DINN SEN BENN DINN DENN BENN BENN BENN BENN BENN BENN BE				
207 DEER CREEK BLVD. DEERFIELD BEACH FL 33442		C/O LANG MANAGEMENT 5295 TOWN CENTER RD SUITE BOCA RATON FL 33486-1088		200					
		US				3. Date Incorporated or Qualified 10/09/1980	3a. Date of L 05/01	ast Report /1996	
Principal Place of Business The Principal Place of Business		2a. Mailing Address			4. FEI Number 59-2040441	Applied For Not Applicable			
Sulte, Apt. #, etc.		Suite, Apt. #, etc. 27 City & State 28		5. Certificate of Status Desired	1 1 2	75 Additional ee Required			
City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip 24	Country 25	Zip 29	Ço 30	untry		This corporation has liability for information Statutes	ntangibie tax un Yes 🔲 No	der s. 199.032,	
<u></u>	9. Name and Address of Curren	t Registered Agent	1001	1		10. Name and Address of New Reg		· · · · · · · · · · · · · · · · · · ·	
				B1	Name		,		
ISAACSC	DN, WILLIAM K.			82		Address (P.O. Box Number is Not Acceptable)			
	WN CENTER RD.				OFFICE AU	ioness (i .o. box indifficer is not Mocopiao	10)	•	
SUITE 20			:	83					
	ATON FL 33486			84	City		85	Zip Code	
				\coprod	·		FL	·	
office or re agent. I a	to the provisions of Sections 617.050; egistered agent, or both, in the State m familiar with, and accept the obligs	2 and 617.1508, Florida Statut of Florida. Such change was a ations of, Section 617.0503, Flo	es, the a authorize orida Sta	above- ed by I atules.	named co the corpor	orporation submits this statement for the pration's board of directors. I hereby accept	urpose of chang it the appointme	ging its registered nt as registered	
SIGNATURE .	Signature, typed or printed name of registered age:	nl and litio if applicable (NO)	F: Regislar	ed Agen	t anutsonia t	quired when reinstating)	DATE		
12.	OFFICERS AND		13.		r algriditoro ro	ADDITIONS/CHANGES TO OFFIC		CTORS IN 12	
TITLE	PD	☑ DELETE		ITLE :	·····	PD	Ch		
NAME	RIGGIN, STEPHEN P		1.2 N	AME.		BRENNAN, Dr. JOHN			
STREET ADDRESS	111 DEER CREEK BLVD #10	2	1.3.9	STREET A		279 DeerCreek Blvd.	#107		
City-ST-ZIP	DEERFIELD BEACH FL	,	1.4.0	CITY-ST	. j τ		'L 3344	2	
TITLE	TD	DELETE	2 h T			/P/D	Ch	ange 🗶 Addition	
NAME	MCCORMICK, JOAN		221	AME	9	STATHIS, CHRIS 171 Deercreek Blvd.			
STREET ADDRESS	123 DEER CREEK BLVD #20	7	23 \$	STREET A				•	
CITY-ST-ZIP	DEERFIELD BEACH FL	•		CITY-ST		Deerfield Beach, F	L 3344	2	
TITLE	D	DELETE	3.5 T			CEC /EDEAC	☐ Ch	ange 🔀 Addition	
NAME	BAKER, JASON		32 N	NAME		SEC/TREAS. FIGHTMASTER, BARKLI	ZV Mc		
STREET ADDRESS	6 MARFWOOD ST.	_	3,3 8	STREET A	DORESS	159 Deer Creek Blvo	1 M5.		
CITY-ST-ZIP	ALBANY NY	ſ	3.4.1	CITY-ST	r-ZIP	Deerfield Beach, I	rL 3344	12	
TITLE	VPD	DELETE	4,1 T	ITLE	· · · · '	D	Ch		
NAME	COHEN, HERBERT	·	4.21	NAME		PIERCE, ROBERT		- 🔻	
STREET ADDRESS	159 DEER CREEK BLVD #50	8	4,3 5	STREET A	NDDRESS	297 Deer Creek Blv	d. #130	7	
CITY-ST-ZIP	DEERFIELD BEACH FL		4.4 0	CITY-ST	- ZIP	Deerfield Beach, F			
TITLE		☐ DELETE	5,1 T	ITLE			☐ Ch		
NAME			5 2 N	AME		D		•	
STREET ADDRESS			538	STREET A	DORESS	Mcran, JOHN			
CITY-ST-ZIP				CITY-ST	í	171 Deercreek Blvc	#706		
TITLE		☐ DELFTE	6.11				☐ Ch	ange 🔲 Additio	
NAME			621	NAME	į	Deerfield Beach, I	FL 334	42	
STREET ADDRESS			6,3.8	STREET A	ADDRESS .	·			
CITY-ST-ZIP				CITY-ST					

14. I do 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.

954-967