

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 764962

FILED
Jan 08, 2003
Secretary of State

Entity Name: HIDDEN VILLAS TOWNHOMES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

37 E BRADLEY
DESTIN, FL 32541 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1779
DESTIN, FL 325401779

New Mailing Address:

FEI Number: 59-2428721 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWMAN-DAILEY RESORT PROPERTIES, INC
C/O LORETTA W SMITH
12815 HWY 98 W STE 100
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HORNSTEIN, ANNE
Address: 37 E. BRADLEY UNIT 11
City-St-Zip: DESTIN, FL 32541

Title: VPD () Delete
Name: STEWART, GAIL
Address: 37 E. BRADLEY UNIT 11
City-St-Zip: DESTIN, FL 32541

Title: D () Delete
Name: MARCOTTE, MICHELLE
Address: 37 E. BRADLEY UNIT 11
City-St-Zip: DESTIN, FL 32541

Title: STD () Delete
Name: JOST, MICHELLE
Address: 109 LAKE POINTE DRIVE
City-St-Zip: WARNER ROBBINS, GA 31088

Title: D () Delete
Name: DAVIS, SCOTT
Address: 106 PERRY STREET
City-St-Zip: CENTERVILLE, TN 37033

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANN HORNSTEIN

PD

01/08/2003

Electronic Signature of Signing Officer or Director

_____ Date