

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Apr 19, 2008  
Secretary of State

DOCUMENT# N01000008010

Entity Name: HIDDEN LINKS MASTER ASSOCIATION, INC.

## Current Principal Place of Business:

11940 FAIRWAY LAKES DR  
SUITE 4  
FORT MYERS, FL 33913

## New Principal Place of Business:

C/O CORNERSTONE ASSOCIATION MANAGEMENT INC  
11940 FAIRWAY LAKES DRS UITE 4  
FORT MYERS, FL 33913

## Current Mailing Address:

11940 FAIRWAY LAKES DR  
SUITE 4  
FORT MYERS, FL 33913

## New Mailing Address:

C/O CORNERSTONE ASSOCIATION MANAGEMENT INC  
11940 FAIRWAY LAKES DRS UITE 4  
FORT MYERS, FL 33913

FEI Number: 04-3637593

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORNERSTONE ASSOC. MGMT., INC  
8359 BEACON BLVD.  
STE. 417  
FORT MYERS, FL 33907 US

## Name and Address of New Registered Agent:

NASSOIY, SHERRY  
C/O CORNERSTONE ASSOCIATION MANAGEMENT INC  
11940 FAIRWAY LAKES DRIVE SUITE 04  
FORT MYERS, FL 33913 US

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: SHERRY NASSOIY

04/19/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DV ( ) Delete  
Name: BYRNE, JOSEPH  
Address: 12060 BRASSIE BEND #202  
City-St-Zip: FORT MYERS, FL 33913

Title: D/S ( ) Delete  
Name: SUTHERLAND, SR, ROBERT  
Address: 12021 BRASSIE CIRCLE #201  
City-St-Zip: FORT MYERS, FL 33913

Title: DP ( ) Delete  
Name: SCARR, MARK  
Address: 12028 HIDDEN LINKS DRIVE  
City-St-Zip: FORT MYERS, FL 33913

Title: DT ( ) Delete  
Name: GERVAIS, KATHLEEN  
Address: 12014 HIDDEN LINKS DR  
City-St-Zip: FORT MYERS, FL 33913

Title: D ( ) Delete  
Name: DELANEY, ROBERT  
Address: 12041 BRASSIE CIRCLE #201  
City-St-Zip: FORT MYERS, FL 33913

## 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: DT (X) Change ( ) Addition  
Name: POWELL, MICHAEL  
Address: 12141 HIDDEN LINKS DR  
City-St-Zip: FORT MYERS, FL 33913

Title: D (X) Change ( ) Addition  
Name: ALLISON, GENE  
Address: 12151 HIDDEN LINKS DRIVE  
City-St-Zip: FORT MYERS, FL 33913

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SHERRY NASSOIY

RA

04/19/2008

Electronic Signature of Signing Officer or Director

Date