

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008364

FILED
Apr 30, 2008
Secretary of State

Entity Name: HIDDEN GLENN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4155 N COURTENAY PARKWAY
MERRITT ISLAND, FL 32953

New Principal Place of Business:

2097 HIDDEN GROVE LANE
#A106
MERRITT ISLAND, FL 32953 US

Current Mailing Address:

4155 N COURTENAY PARKWAY
MERRITT ISLAND, FL 32953

New Mailing Address:

2097 HIDDEN GROVE LANE
#A106
MERRITT ISLAND, FL 32953 US

FEI Number: 20-8693202

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BISCONTINI, JEAN M
4017 SHUTTLE COURT
MERRITT ISLAND, FL 32953 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: FREUND, THOMAS O
Address: 1979 BEDFORD DRIVE
City-St-Zip: TITUSVILLE, FL 32796

Title: V () Delete
Name: WALSH, DAVID M
Address: 541 SUNSET LAKES DRIVE
City-St-Zip: MERRITT ISLAND, FL 32953

Title: STD () Delete
Name: BISCONTINI, LEE R
Address: 4155 N COURTENAY PKWY
City-St-Zip: MERRITT ISLAND, FL 32953

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FREUND, THOMAS O
Address: 1979 BEDFORD DRIVE
City-St-Zip: TITUSVILLE, FL 32796 US

Title: V (X) Change () Addition
Name: WALSH, DAVID M
Address: 541 SUNSET LAKES DRIVE
City-St-Zip: MERRITT ISLAND, FL 32953 US

Title: STD (X) Change () Addition
Name: BISCONTINI, LEE R
Address: 4017 SHUTTLE COURT
City-St-Zip: MERRITT ISLAND, FL 32953 US

Title: D () Change (X) Addition
Name: BISCONTINI, JEAN M
Address: 2097 HIDDEN GROVE LANE #106
City-St-Zip: MERRITT ISLAND, FL 32953 US

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: JEAN MARIE BISCONTINI

RA/D

04/30/2008

Electronic Signature of Signing Officer or Director

Date