


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 16, 2004 8:00 am**  
**Secretary of State**

07-16-2004 90009 036 \*\*\*\*61.25

<b>DOCUMENT # N28379</b> 1. Entity Name <b>HIDDEN LAKES ESTATES HOMEOWNERS ASSOCIATION OF DEFUNIAK SPRINGS, INC.</b>					
Principal Place of Business <b>HIDDEN LAKES EST. HOMEOWNERS ASSN. P.O. BOX 954 DEFUNIAK SPRINGS, FL 32435 US</b>			Mailing Address <b>HIDDEN LAKES EST. HOMEOWNERS ASSN. P.O. BOX 954 DEFUNIAK SPRINGS, FL 32435 US</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>59-1884219</b> <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>BRADLEY, EDWARD 436 HIDDEN LAKES TRAIL DEFUNIAK SPRINGS, FL 32433</b>			Name <b>Rick Law</b> Street Address (P.O. Box Number is Not Acceptable) <b>468 Hidden Lakes Trail</b> City <b>DeFuniak Springs</b> <b>FL</b> Zip Code <b>32433</b>		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <i>Rick Law</i> <b>Rick Law (President)</b> DATE <b>13 JUL 04</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee Is \$61.25</b> <b>Due by September 8, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>PD BRADLEY, EDWARD 436 HIDDEN LAKES TRAIL DEFUNIAK SPRINGS, FL 32433</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>PD Law, Rick 468 Hidden Lakes Trail DeFuniak Springs, FL. 32433</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>VPD MAJORS, C. GREG 286 CLAY STREET DEFUNIAK SPGS, FL 32433</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>VPD Bradshaw, Aaron 294 Hidden Lakes Trail DeFuniak Springs, FL. 32433</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>STD BUCHANNON, JAMES 313 HIDDEN LAKES TRAIL DEFUNIAK SPRINGS, FL 32433</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>STD Lewis, Janette 45 Hidden Lakes Trail DeFuniak Springs, FL. 32433</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE: <i>Rick Law</i> Rick Law (President) 13 JUL 04 (850) 951-0945</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

**54062765**



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