

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005624

FILED
Mar 28, 2009
Secretary of State

Entity Name: HIDDEN HARBOR ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

64 HIDDEN HURBON LN.
DESTIN, FL 32550

New Principal Place of Business:

74 HIDDEN HARBOR LN.
DESTIN, FL 32550

Current Mailing Address:

P.O. BOX 6398
DESTIN, FL 32550

New Mailing Address:

FEI Number: 59-3499451 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OWENS, GAY
64 HIDDEN HARBOR LN
MIRAMAR BEACH, FL 32550 US

Name and Address of New Registered Agent:

MORALES, ROBERT
74 HIDDEN HARBOR LN
DESTIN, FL 32550 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: ROBERT MORALES 03/28/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: OWENS, GAY
Address: 64 HIDDEN HARBOR LN
City-St-Zip: DESTIN, FL 32550

Title: DVP () Delete
Name: CRAIG, KEVIN
Address: 296 NORTH HOLIDAY RD
City-St-Zip: DESTIN, FL 32550

Title: DST () Delete
Name: MOORE, JAN
Address: 52 HIDDEN HURBON LN.
City-St-Zip: DESTIN, FL 32250

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: MORALES, ROBERT
Address: 74 HIDDEN HARBOR LN
City-St-Zip: DESTIN, FL 32550

Title: DVP (X) Change () Addition
Name: COTE, ROBERT
Address: 70 HIDDEN HARBOR LN.
City-St-Zip: DESTIN, FL 32550

Title: DST (X) Change () Addition
Name: LANE, ELIZABETH
Address: 15 HIDDEN HARBOR LN
City-St-Zip: DESTIN, FL 32250

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: ROBERT MORALES DP 03/28/2009

Electronic Signature of Signing Officer or Director Date