

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736948

FILED
Feb 12, 2009
Secretary of State

Entity Name: HIDDEN LANDING HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3461-B FAIRLANE FARMS RD.
WELLINGTON, FL 33414 US

New Principal Place of Business:

C/O WELLINGTON MANAGEMENT, INC.
3461-B FAIRLANE FARMS ROAD
WELLINGTON, FL 33414 US

Current Mailing Address:

3461-B FAIRLANE FARMS RD.
WELLINGTON, FL 33414 US

New Mailing Address:

C/O WELLINGTON MANAGEMENT, INC.
3461-B FAIRLANE FARMS ROAD
WELLINGTON, FL 33414 US

FEI Number: 59-1365698

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWSOME, JOHN
3461-B FAIRLANE FARMS RD.
WELLINGTON, FL 33414 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: V () Delete
Name: BURNS, JULIE
Address: 12775 SPINNAKER LANE
City-St-Zip: WELLINGTON, FL 33414

Title: TS () Delete
Name: LODWIG, LAURA
Address: 12720 SPINNAKER LANE
City-St-Zip: WELLINGTON, FL 33414

Title: P () Delete
Name: RODRIGUEZ, GRACE
Address: 12775 SPINNAKER LANE
City-St-Zip: WELLINGTON, FL 33414

Title: D (X) Delete
Name: CORMIER, ED
Address: 12883 SKINNAKER LANE
City-St-Zip: WELLINGTON, FL 33414

Title: T (X) Delete
Name: HOWARD, JOHN J
Address: 12795 SPINNAKER LANE
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: BURNS, JULIE
Address: 12775 SPINNAKER LANE
City-St-Zip: WELLINGTON, FL 33414

Title: TSD (X) Change () Addition
Name: LODWIG, LAURA
Address: 12720 SPINNAKER LANE
City-St-Zip: WELLINGTON, FL 33414

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 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: GRACE RODRIGUEZ

P

02/12/2009

Electronic Signature of Signing Officer or Director

Date