

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08590

**FILED**  
**Jan 24, 2012**  
**Secretary of State**

**Entity Name:** HIDDEN SPRINGS / ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

7711 PINE VISTA CT.  
ORLANDO, FL 32819 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1045  
WINDERMERE, FL 34786

**New Mailing Address:**

**FEI Number:** 59-3035323

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LONG, JAMES  
7711 PINE VISTA CT.  
ORLANDO, FL 32819 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: PRES  
Name: OLSZEWSKI, JEFF  
Address: 7710 WHITE ASH ST.  
City-St-Zip: ORLANDO, FL 32819

Title: TRES  
Name: LONG, JAMES  
Address: 7711 PINE VISTA CT.  
City-St-Zip: ORLANDO, FL 32819

Title: 2VP  
Name: HAWKINS, FRED  
Address: 5441 SPLIT PINE CT  
City-St-Zip: ORLANDO, FL 32819

Title: S  
Name: SHEPPARD, DORIS  
Address: 5700 TAMARACK DR.  
City-St-Zip: ORLANDO, FL 32819

I hereby 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 all other like empowered.

SIGNATURE: JAMES LONG

MR

01/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date