

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008010

**FILED
Apr 06, 2013
Secretary of State
CC9377837197**

Entity Name: HIDDEN LINKS MASTER ASSOCIATION, INC.

Current Principal Place of Business:

C/O CORNERSTONE ASSOCIATION MANAGEMENT INC
11940 FAIRWAY LAKES DRS UITE 4
FORT MYERS, FL 33913

Current Mailing Address:

C/O CORNERSTONE ASSOCIATION MANAGEMENT INC
11940 FAIRWAY LAKES DRS UITE 4
FORT MYERS, FL 33913

FEI Number: 04-3637593

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NASSOIY, SHERRY
C/O CORNERSTONE ASSOCIATION MANAGEMENT INC
11940 FAIRWAY LAKES DRIVE SUITE 04
FORT MYERS, FL 33913 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DVP
Name BYRNE, JOSEPH
Address 12060 BRASSIE BEND #202
City-State-Zip: FORT MYERS FL 33913

Title D
Name SUTHERLAND, SR, ROBERT
Address 12021 BRASSIE CIRCLE #201
City-State-Zip: FORT MYERS FL 33913

Title DP
Name SCARR, MARK
Address 12028 HIDDEN LINKS DRIVE
City-State-Zip: FORT MYERS FL 33913

Title DT
Name ALLISON, GENE
Address 12151 HIDDEN LINKS DR
City-State-Zip: FORT MYERS FL 33913

Title DS
Name MULLINS, J.R.
Address 11990 HIDDEN LINKS DRIVE
City-State-Zip: FORT MYERS FL 33913

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: MARK SCARR

PRESIDENT

04/06/2013

Electronic Signature of Signing Officer/Director Detail

Date