2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2016
Secretary of State
CC8628921083

DOCUMENT# P10000009079

Entity Name: HIDDEN PINES RETIREMENT CENTER INC.

Current Principal Place of Business:

1840 SW 31ST AVE
OCALA, FL 34474

Current Mailing Address:

P O BOX 771
OCALA, FL 34478 US

FEI Number: 27-1805534

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MEDINA, DALE
1840 SW 31ST AVE
OCALA, FL 34474 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	P\D	Title	VP\D
Name	MEDINA, DALE E	Name	MEDINA, ROBERTO R
Address	P O BOX 771	Address	P O BOX 771
City-State-Zip:	OCALA FL 34478	City-State-Zip:	OCALA FL 34478

Title	CLERK
Name	CHOQUETTE, RINA M
Address	819 NE 12TH TERRACE
City-State-Zip:	OCALA FL 34470

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RINA CHOQUETTE CLERK 01/19/2016

Electronic Signature of Signing Officer/Director Detail — Date