

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 617150

FILED
Feb 18, 2009
Secretary of State

Entity Name: HIDDEN ACRES ESTATES, INC.

Current Principal Place of Business:

964 COUNTY RD #721
LORIDA, FL 33857

New Principal Place of Business:

Current Mailing Address:

964 COUNTY RD #721
LORIDA, FL 33857

New Mailing Address:

FEI Number: 59-1874332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARDCASTLE, JOANNA G
964 CR 721
LORIDA, FL 33857 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HARDCASTLE, JOANNA
Address: 964 CR 721
City-St-Zip: LORIDA, FL 33857

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: HARDCASTLE, JOANNA
Address: 964 CR 721
City-St-Zip: LORIDA, FL 33857

Title: P () Change (X) Addition
Name: ROWLAND, JAMES
Address: 964 CR 721
City-St-Zip: LORIDA, FL 33857

Title: VP () Change (X) Addition
Name: IVY, CURTIS
Address: 964 CR 721
City-St-Zip: LORIDA, FL 33857

Title: S () Change (X) Addition
Name: HARDCASTLE, JOANNA
Address: 964 CR 721
City-St-Zip: LORIDA, FL 33857

Title: T () Change (X) Addition
Name: COX, CHARLES
Address: 964 CR 721
City-St-Zip: LORIDA, FL 33857

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

SIGNATURE: JOANNA G. HARDCASTLE

S

02/18/2009

Electronic Signature of Signing Officer or Director

_____ Date