

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724467

FILED  
Apr 26, 2007  
Secretary of State

**Entity Name:** HIDDEN HARBOUR ONE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5710 HARBOUR CLUB DRIVE  
FORT MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

5710 HARBOUR CLUB DRIVE  
FORT MYERS, FL 33919

**New Mailing Address:**

**FEI Number:** 59-1658002

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

O'DONNELL, CRAIG  
5748 BASS CIRCLE  
5710 HARBOUR CLUB RD  
FT MYERS, FL 33919 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: P ( ) Delete  
Name: FRISKE, SANDY  
Address: 5765 HIDDEN HARBOUR BLVD  
City-St-Zip: FORT MYERS, FL 33919

Title: VP ( ) Delete  
Name: SMITH, BUD  
Address: HIDDEN HARBOUR  
City-St-Zip: FORT MYERS, FL 33919

Title: S ( ) Delete  
Name: FRICK, BETTY  
Address: 5705 HARBOUR CLUB ROAD  
City-St-Zip: FORT MYERS, FL 33919

Title: T ( ) Delete  
Name: O'DONNELL, CRAIG  
Address: 5748 BASS CIRCLE  
City-St-Zip: FORT MYERS, FL 33919

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SANDY FRISKE

P

04/26/2007

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

\_\_\_\_\_  
Date