

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724467

FILED
Apr 21, 2008
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:

O'DONNELL, CRAIG
843 HATCHEE VISTA DRIVE
5710 HARBOUR CLUB RD
FT MYERS, FL 33919 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:

04/21/2008

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: P (X) Change () Addition
Name: JACOBS, DONALD
Address: 5690 HARBOUR CLUB ROAD
City-St-Zip: FORT MYERS, FL 33919

Title: VP (X) Change () Addition
Name: SMITH, BUD
Address: 5682 HARBOUR CLUB ROAD
City-St-Zip: FORT MYERS, FL 33919

Title: S (X) Change () Addition
Name: BROWN, GLORIA
Address: 4771 ANCHORAGE AVENUE
City-St-Zip: FORT MYERS, FL 33919

Title: T (X) Change () Addition
Name: O'DONNELL, CRAIG
Address: 843 HATCHEE VISTA DRIVE
City-St-Zip: FORT MYERS, FL 33919

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: CRAIG O'DONNELL

T

04/21/2008

Electronic Signature of Signing Officer or Director

Date