2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725455

FILED Feb 10, 2010 Secretary of State

Entity Name: HIDDEN HARBOUR OF ALTAMONTE SPRINGS, INC.

Current Principal Place of Business: New Principal Place of Business:

620 MARINER WAY 605 MARINER WAY

ALTAMONTE SPRINGS, FL 32701 US ALTAMONTE SPRINGS, FL 32701 US

Current Mailing Address: New Mailing Address:

P O BOX 150474

ALTAMONTE SPG, FL 32715 US

FEI Number: 20-2695825 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

RIZZO, DAVID M JOHNSON, JAMES R 620 MARINER WAY 605 MARINER WAY

ALTAMONTE SPRINGS, FL 32701 US ALTAMONTE SPRINGS, FL 32701 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: JAMES R JOHNSON 02/10/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: TD

Name: JOHNSON, JAMES R Address: 620 MARINER WAY

City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: SD

Name: THOMPSON-PARCELL, ELLEN

Address: 643 MARINER WAY

City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VD

Name: RIZZO, DAVID M Address: 620 MARINER WAY

City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: PD

Name: FOX, DAVE Address: 606 BIRCH BLVD

City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VD

Name: CALDWELL, JEFF Address: 618 RED SAIL LANE

City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: JAMES R JOHNSON TD 02/10/2010