2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2006
Secretary of State

DOCUMENT# 726847

Entity Name: HIDDEN KEY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

11518 LANDING PLACE
B-1
PALM BEACH GARDENS, FL 33408 US

New Principal Place of Business:

11521 LANDING PLACE
E-1
PALM BEACH GARDENS, FL 33408 US

Current Mailing Address:

11518 LANDING PLACE
B-1
PALM BEACH GARDENS, FL 33408 US

New Mailing Address:

11521 LANDING PLACE
E-1
PALM BEACH GARDENS, FL 33408 US

FEI Number: 59-1665071 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GOODMAN, TONY
11518 LANDING PLACE
B-1
PALM BEACH GARDENS, FL 33408 US

Name and Address of New Registered Agent:

GOULD, THOMAS
11521 LANDING PLACE
E-1
PALM BEACH GARDENS, FL 33408 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: THOMAS GOULD 01/06/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: TD ( ) Delete
Name: NASCA, SAMUEL
Address: 11518 LANDING PLACE B-3
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: PD ( ) Delete
Name: GOODMAN, TONY
Address: 11518 LANDING PLACE B-1
City-St-Zip: N. PALM BEACH, FL 33408

Title: SD ( ) Delete
Name: ANDERSON, CHRISTINA
Address: 11518 LANDING PLACE D-4
City-St-Zip: N. PALM BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition
Name: GOULD, THOMAS
Address: 11521 LANDING PLACE #E-1
City-St-Zip: PALM BEACH GARDENS, FL 33408 US

Title: S (X) Change ( ) Addition
Name: ANDERSON, CHRISTINA
Address: 11518 LANDING PLACE #D-4
City-St-Zip: PALM BEACH GARDENS, FL 33408 US

Title: D (X) Change ( ) Addition
Name: NASCA, SAMUEL
Address: 11518 LANDING PLACE #B-3
City-St-Zip: PALM BEACH GARDENS, FL 33408 US

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS GOULD PT 01/06/2006
Electronic Signature of Signing Officer or Director Date