2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2009
Secretary of State

DOCUMENT# 726847

Entity Name: HIDDEN KEY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

11518 LANDING PL
D2
NORTH PALM BEACH, FL 33408 US

New Principal Place of Business:

Current Mailing Address:

11518 LANDING PL
D2
NORTH PALM BEACH, FL 33408 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

WILSON, JENNIFER G
11518 LANDING PL
#D-2
PALM BEACH GARDENS, FL 33408 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:	V	( ) Delete
Name:	DUFF, JACK	
Address:	12824 SUGAR CREEK DRIVE	
City-St-Zip:	PALM BEACH GARDENS, FL US	
Title:	P	( ) Delete
Name:	ZAMLUT, ILEAN	
Address:	11518 LANDING PLACE #A-3	
City-St-Zip:	PALM BEACH GARDENS, FL 33408 US	
Title:	T	( ) Delete
Name:	WILSON, JENNIFER	
Address:	11518 LANDING PL #D-2	
City-St-Zip:	PALM BEACH GARDENS, FL 33408 US	
Title:	D	( ) Delete
Name:	ANDERSON, CHRISTINA	
Address:	11518 LANDING PLACE #D-4	
City-St-Zip:	PALM BEACH GARDENS, FL 33408 US	
Title:	S	( ) Delete
Name:	MCGRATH, CAROL	
Address:	11518 LANDING PL #A-4	
City-St-Zip:	NORTH PALM BEACH, FL 33408	
Title:		( ) Delete
Name:		
Address:		
City-St-Zip:		

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:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	( ) Change (X) Addition
Name:	AUSTIN, DAVID	
Address:	11518 LANDING PLACE, #C2	
City-St-Zip:	NORTH PALM BEACH, FL 33408	

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: JENNIFER WILSON T 02/24/2009

Electronic Signature of Signing Officer or Director — Date