

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727794

FILED
Jan 26, 2009
Secretary of State

Entity Name: HIDDEN LAKE VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

HIDDEN LAKE VILLAS
788 PARK SHORE DRIVE
NAPLES, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

788 PARK SHORE DRIVE
CLUBHOUSE/OFFICE
NAPLES, FL 34103 US

New Mailing Address:

FEI Number: 59-1531456

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEADOWS, SONJA
788 PARKSHORE DRIVE
CLUBHOUSE/OFFICE
NAPLES, FL 34103 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: BLAUVELT, DON
Address: 788 PARK SHORE E-13
City-St-Zip: NAPLES, FL 34103

Title: DVP () Delete
Name: CATALINA, CHARLES
Address: 788 PARK SHORE DR
City-St-Zip: NAPLES, FL 34103

Title: TD () Delete
Name: LEITES, STEVE
Address: 788 PARK SHORE DR H-26
City-St-Zip: NAPLES, FL 34103

Title: SD () Delete
Name: ROBINSON, BILL
Address: 788 PARK SHORE DR F-21
City-St-Zip: NAPLES, FL 34103

Title: DVP () Delete
Name: MCCOY, RONALD
Address: 788 PRK SHORE DR H-32
City-St-Zip: NAPLES, FL 34103

Title: D () Delete
Name: CHANDLER, FLORENCE
Address: 788 PARK SHORE DR E-22
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: LITES, STEVE
Address: 788 PARK SHORE DR H-26
City-St-Zip: NAPLES, FL 34103

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

Title: D (X) Change () Addition
Name: MCCOY, RONALD
Address: 788 PRK SHORE DR H-32
City-St-Zip: NAPLES, FL 34103

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: SONJA MEADOWS

MGR

01/26/2009

Electronic Signature of Signing Officer or Director

Date