

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727794

FILED  
Mar 30, 2010  
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:**

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

**Current Mailing Address:**

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

**New Mailing Address:**

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

**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: PRES  
Name: BLAUVELT, DONALD  
Address: 788 PARK SHORE E-13  
City-St-Zip: NAPLES, FL 34103

Title: VP  
Name: CHANDLER, FLORENCE  
Address: 788 PARK SHORE DRIVE, E-22  
City-St-Zip: NAPLES, FL 34103

Title: TD  
Name: ROBINSON, WILLIAM  
Address: 788 PARK SHORE DR, F-21  
City-St-Zip: NAPLES, FL 34103

Title: SECR  
Name: CONA, BARBARA  
Address: 788 PARK SHORE DR F-31  
City-St-Zip: NAPLES, FL 34103

Title: DIR.  
Name: MCCOY, RONALD  
Address: 788 PRK SHORE DR H-32  
City-St-Zip: NAPLES, FL 34103

Title: D  
Name: POLANSKY, LANNY  
Address: 788 PARK SHORE DR C-30  
City-St-Zip: NAPLES, FL 34103

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: DON BLAUVELT

PRES

03/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date