

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743394

FILED  
Jan 18, 2007  
Secretary of State

**Entity Name:** HIDDEN OAKS ESTATES ASSOCIATION, INC.

**Current Principal Place of Business:**

4902 HIDDEN OAKS TRAIL  
SARASOTA, FL 342323040

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 7754  
SARASOTA, FL 342787754

**New Mailing Address:**

**FEI Number:** 59-2138257

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MITCHELL, DAVID  
22 SOUTH LINKS AVE  
STE 300  
SARASOTA, FL 34236 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: PD ( ) Delete  
Name: DILGES, BRUCE  
Address: 4731 STONE RIDGE TRL  
City-St-Zip: SARASOTA, FL 34232

Title: D ( ) Delete  
Name: CARDEN, DONNA M  
Address: 4940 HIDDEN OAKS LANE  
City-St-Zip: SARASOTA, FL 34232

Title: TD ( ) Delete  
Name: WYATT, JERRY  
Address: 4902 HIDDEN OAKS TRL  
City-St-Zip: SARASOTA, FL 34232

Title: D ( ) Delete  
Name: PONITZ, KEITH P  
Address: 4828 STONE RIDGE TRL  
City-St-Zip: SARASOTA, FL 34232

Title: D (X) Delete  
Name: COMPARETTO, MARIO L  
Address: 4647 STONE RIDGE TRL  
City-St-Zip: SARASOTA, FL 34232

Title: D ( ) Delete  
Name: HATCHER, BENJAMIN T  
Address: 4803 STONE RIDGE TRL  
City-St-Zip: SARASOTA, FL 34232

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: DILGES, BRUCE  
Address: 4731 STONE RIDGE TRL  
City-St-Zip: SARASOTA, FL 34232

Title: SD (X) Change ( ) Addition  
Name: PAYSON, EUGENE A  
Address: 1650 HONORE AVE  
City-St-Zip: SARASOTA, FL 34232

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:

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: EUGENE A PAYSON

SD

01/18/2007

Electronic Signature of Signing Officer or Director

Date