2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2008
Secretary of State

DOCUMENT# 745180

Entity Name: HIDDEN HILLS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

7400 NW 47TH CT.
GAINESVILLE, FL 32606

New Principal Place of Business:

Current Mailing Address:

7400 NW 47TH CT.
GAINESVILLE, FL 32606

New Mailing Address:

7205 NW 47 CT
GAINESVILLE, FL 32606

FEI Number: 59-1872486 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEBER, MARY L
7205 NW 47 CT
GAINESVILLE, FL 32606 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: TD ( ) Delete
Name: WEBER, MARY L
Address: 7205 NW 47 CT
City-St-Zip: GAINESVILLE, FL 32606

Title: PD ( ) Delete
Name: KORNBLUM, HELEN
Address: 7303 NW 47 CT
City-St-Zip: GAINESVILLE, FL 32606

Title: SD ( ) Delete
Name: WILLIS, MARTHA
Address: 4729 NW 71ST BLVD
City-St-Zip: GAINESVILLE, FL 32606

Title: VD ( ) Delete
Name: WATSON, KEITH
Address: 7214 NW 47 CT
City-St-Zip: GAINESVILLE, FL 32606

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:

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: MARY LOUISE WEBER TD 04/23/2008

Electronic Signature of Signing Officer or Director — Date