2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2004 8:00 am
Secretary of State
04-27-2004 90048 019 ****61.25

DOCUMENT # 746812

1. Entity Name
HIDDEN PINES HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3461-B FAIRLANE FARMS RD. WELLINGTON, FL 33414 US	3461-B FAIRLANE FARMS RD. WELLINGTON, FL 33414 US

01132004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-1936160 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

NEWSOME, JOHN
3461-B FAIRLANE FARMS RD.
WELLINGTON, FL 33414

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD STEINER, MURRY 12765 W. FOREST HILL BLVD. #1302 WELLINGTON, FL 33414	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CHESNEY, AUDREY 281 WOOD DALE WELLINGTON, FL 33414	☒ Delete	TITLE P / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition Jim Fritts 316 Wood Dale Dr. Wellington, FL 33414
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TECHERA, JORGE 322 WOOD DALE WELLINGTON, FL 33414	☐ Delete	TITLE VP / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition Dennis McMahon 375 Wood Dale Dr Wellington FL 33414
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WALTOR, JOAN 12765 W. FOREST HILL BLVD. #1302 WELLINGTON, FL 33414	☒ Delete	TITLE D / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition Arlene Baldwin 287 Wood Dale Dr. Wellington FL 33414
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D UNGER, GEORGE 15590 CEDAR GROVE LANE WELLINGTON, FL 33414	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: James M Fritts 3-25-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #