

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 27, 2010
Secretary of State

DOCUMENT# 746812

Entity Name: HIDDEN PINES HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**C/O THE CONTINENTAL GROUP, INC.
3461-B FAIRLANE FARMS ROAD
WELLINGTON, FL 33414 US**New Principal Place of Business:**C/O CMC MANAGEMENT
2950 JOG ROAD
GREENACRES, FL 33467 US**Current Mailing Address:**C/O THE CONTINENTAL GROUP, INC.
3461-B FAIRLANE FARMS ROAD
WELLINGTON, FL 33414 US**New Mailing Address:**C/O CMC MANAGEMENT
2950 JOG ROAD
GREENACRES, FL 33467 US**FEI Number:** 59-1936160**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**NEWSOME, JOHN
3461-B FAIRLANE FARMS RD.
WELLINGTON, FL 33414 US**Name and Address of New Registered Agent:**HILLEY&WYANT-CORTEZ, P.A.
860 US HIGHWAY ONE
SUITE 108
NORTH PALM BEACH, FL 33408-382 US

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: DON HILLEY

08/27/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: MCMAHON, DENNIS
Address: 375 WOODDALE DR
City-St-Zip: WELLINGTON, FL 33414

Title: T
Name: HETZEL, PATRICIA
Address: 220 PLEASANT WOOD DR
City-St-Zip: WELLINGTON, FL 33414

Title: S
Name: STRAUCH, TAFFY
Address: 315 PINE SHADOW WAY
City-St-Zip: WELLINGTON, FL 33414

Title: VP
Name: CHESNEY, JOHN JR
Address: 281 WOOD DALE DR
City-St-Zip: WELLINGTON, FL 33414

Title: D
Name: GRIMM, JAMES
Address: 370 WOOD DALE DR
City-St-Zip: WELLINGTON, FL 33414

Title: D
Name: PUGLIESE, DENNIS
Address: 340 WOOD DALE
City-St-Zip: WELLINGTON, FL 33414

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: DENNIS MCMAHON

P

08/27/2010

Electronic Signature of Signing Officer or Director

Date