


FILED 770510

03 MAY 19 PM 2:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 770510
 1. Entity Name
HIDDEN OAKS CONDOMINIUM ASSOCIATION, INC.




Principal Place of Business
**3303 HIDDEN TIMBER LANE
 WINTER PARK FL 32792**

Mailing Address
**3303 HIDDEN TIMBER LANE
 WINTER PARK FL 32792**

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 Zip Country

55033526
 0u-1u-03 90382 017 \$61.25

 CHECK HERE IF MAKING CHANGES

8. Name and Address of Current Registered Agent
**TORRES, GERSON
 C/O HIDDEN OAKS CONDOMINIUM ASSOC., INC.
 3302 AMBERWOOD WAY
 WINTER PARK FL 32792**

4. FEI Number - **APPLIED FOR - 59-2517749**
 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

7. Name and Address of Now Registered Agent
 Name: **THOMAS S. KORNEGAY**
 Street Address (P.O. Box Number is Not Acceptable):
3967 RIVER VIEW WAY
 City: **WINTER PARK FL** Zip Code: **32792**

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: *Thomas S. Kornegay* **THOMAS S. KORNEGAY, PRESIDENT** DATE: **4-11-03**

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

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

Make Check Payable to Florida Department of State

FILE NOW: FEE IS \$61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KEENER, BERT 3221 OAK LAWN PLACE WINTER PARK FL 32792 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TORRES, GERSON 3302 AMBERWOOD WAY WINTER PARK FL 32792 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	J DELGADO, JOCELYN 7440 WOODBURN COURT WINTER PARK FL 32792 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KENNY, JENNIFER 3358 CEDAR SPRINGS PLACE WINTER PARK FL 32792 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROSSEN, HEATHER 3236 OAK LAWN PLACE WINTER PARK FL 32792 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SULLIVAN, JENNIFER 7453 BELLE RIVER COURT WINTER PARK FL 32792 <input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition Please see attached sheet
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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.

Thomas S. Kornegay **THOMAS S. KORNEGAY, PRESIDENT**

201-252-5799

ATTACHMENT

~~55055526~~

Doc # 770516

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

Title	P	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	Thomas S. Kornegay		
Street Address	3367 River View Way		
City-ST-ZIP	Winter Park, FL 32792		
Title	V	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	John Corkery		
Street Address	3235 Forest Oaks Court		
City-ST-ZIP	Winter Park, FL 32792		
Title	T	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	Marilou G. Arlandson		
Street Address	3311 Amber Wood Way		
City-ST-ZIP	Winter Park, FL 32792		
Title	S	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	Raquel Hernandez		
Street Address	3283 Oak Lake Place		
City-ST-ZIP	Winter Park, FL 32792		
Title	D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	Maria H. Sedens		
Street Address	1235 E. Cleveland Ave.		
City-ST-ZIP	Apopka, FL 32703		
Title	D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	Gene M. Paz		
Street Address	3233 Oak Lawn Place		
City-ST-ZIP	Winter Park, FL 32792		
Title	D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	Carmen M. Ramos		
Street Address	3365 Cedar Springs Place		
City-ST-ZIP	Winter Park, FL 32792		