

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000093

FILED
Apr 09, 2010
Secretary of State

Entity Name: HIDDEN LAKES RECREATION ASSOCIATION, INC.

Current Principal Place of Business:

C/O INTEGRATED PROPERTY MGMT.
3435-10TH STREET N #201
NAPLES, FL 34103

New Principal Place of Business:

C/O INTEGRATED PROPERTY MGMT.
5020 TAMiami TR NORTH, STE 206
NAPLES, FL 34103

Current Mailing Address:

% INTEGRATED PROPERTY MGMT
3435 10TH ST N 201
NAPLES, FL 34103

New Mailing Address:

C/O INTEGRATED PROPERTY MGMT
5020 TAMiami TR NORTH, STE 206
NAPLES, FL 34103

FEI Number: 59-3729175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHIELDS, CHRISTOPHER J
1833 HENDRY STREET
P.O. DRAWER
FORT MYERS, FL 33902 US

Name and Address of New Registered Agent:

SHIELDS, CHRISTOPHER J
1833 HENDRY STREET
FORT MYERS, FL 33901 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: CHRISTOPHER J SHIELDS

04/09/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: LOW, ROBERT B
Address: 9870 SPRING RUN BLVD #3005
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DVP
Name: KLOCKE, RONALD A
Address: 9870 SPRING RUN BLVD. #3001
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DT
Name: SCHWARTZ, DONALD
Address: 23780 CLEAR SPRING CRT. #1501
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DS
Name: FICUS, CAROL
Address: 23760 CLEAR SPRING CT #1301
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D
Name: CAVADINI, CHARLES S
Address: 9830 SPRING RUN BLVD #3407
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DAL
Name: WILLIAMS, DAVE
Address: 9891 SPRING RUN BLVD #2701
City-St-Zip: BONITA SPRINGS, FL 34135

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: ROBERT B LOW

DP

04/09/2010

Electronic Signature of Signing Officer or Director

Date