

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003085

FILED  
Feb 28, 2011  
Secretary of State

**Entity Name:** HIDDEN TREASURE FELLOWSHIP, INC.

**Current Principal Place of Business:**

22631 ROCKLAND AVENUE  
SORRENTO, FL 32776

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1421  
SORRENTO, FL 327761421

**New Mailing Address:**

**FEI Number:** 59-3645390

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DAY BRACELAND, DEBORAH JO  
22631 ROCKLAND AVENUE  
SORRENTO, FL 32776 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: DP  
Name: DAY BRACELAND, DEBORAH JO  
Address: 22631 ROCKLAND AVENUE  
City-St-Zip: SORRENTO, FL 32776

Title: DT  
Name: MOORE, TRICIA  
Address: 25706 PINE VALLEY DRIVE  
City-St-Zip: MOUNT PLYMOUTH, FL 327769438

Title: DS  
Name: STANLEY-CUMMINGS, D I  
Address: 519 E. 1ST STREET #700  
City-St-Zip: SANFORD, FL 32771454

Title: DV  
Name: DAY BRACELAND, THOMAS A  
Address: 423 NORTH ORANGE AVE  
City-St-Zip: SANFORD, FL 32771

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: DEBORAH JO DAY BRACELAND

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02/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date