2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# N00000005601

Entity Name: HIDDEN OAKS OF LAKE ELOISE HOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2155 EXECUTIVE RD.
WINTER HAVEN, FL 33884

New Principal Place of Business:

Current Mailing Address:

2155 EXECUTIVE RD.
WINTER HAVEN, FL 33884

New Mailing Address:

FEI Number: 71-0880878 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VAN STEENBURG, MICHAEL T
2155 EXECUTIVE ROAD
WINTER HAVEN, FL 33884 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: PRES ( ) Delete
Name: VAN STEENBURG, MICHAEL T
Address: 2155 EXECUTIVE RD.
City-St-Zip: WINTER HAVEN, FL 33884

Title: VP ( ) Delete
Name: OWENS, DONNIE
Address: 160 HIDDEN OAKS LANE
City-St-Zip: WINTER HAVEN, FL 33884

Title: SEC ( ) Delete
Name: GARRARD, JULIE
Address: 130 HIDDEN OAKS LANE
City-St-Zip: WINTER HAVEN, FL 33884

Title: TRE ( ) Delete
Name: VANSTEENBURG, VICKI
Address: 165 HIDDEN OAKS LANE
City-St-Zip: WINTER HAVEN, FL 33884

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: VICKI VANSTEENBURG TRE 04/29/2005

Electronic Signature of Signing Officer or Director — Date