

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000281

FILED  
Jun 01, 2011  
Secretary of State

**Entity Name:** HIDDEN OAKS OF CENTRAL FLORIDA HINEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

5393 STONE OAKS DRIVE  
LAKELAND, FL 33811

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 6792  
LAKELAND, FL 33807

**New Mailing Address:**

**FEI Number:** 40-0000786

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOOD, BILL  
5393 STONE OAKS DR  
LAKELAND, FL 33811 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: P  
Name: SMALL, ALETHA  
Address: 5359 STONE OAKS DR  
City-St-Zip: LAKELAND, FL 33811

Title: V  
Name: CALLAN, JOHN  
Address: PO BOX 6792  
City-St-Zip: LAKELAND, FL 33807

Title: T  
Name: HOOD, BILL  
Address: 5393 STONE OAKS DRIVE  
City-St-Zip: LAKELAND, FL 33811

Title: S  
Name: AYERS, MELANIE  
Address: PO BOX 6792  
City-St-Zip: LAKELAND, FL 33807

Title: D  
Name: CURRY, NEIL  
Address: PO BOX 6792  
City-St-Zip: LAKELAND, FL 33807

Title: D  
Name: HARRISON, DARREN  
Address: PO BOX 6792  
City-St-Zip: LAKELAND, FL 33807

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: BILL HOOD

T

06/01/2011

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

\_\_\_\_\_  
Date