2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2006
Secretary of State

DOCUMENT# N01000005948

Entity Name: HIDDEN COVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2375 TERA VERDE LANE
NAPLES, FL 34105

New Principal Place of Business:

6700 LONE OAK BLVD
NAPLES, FL 34109

Current Mailing Address:

2375 TERA VERDE LANE
NAPLES, FL 34105

New Mailing Address:

6700 LONE OAK BLVD
NAPLES, FL 34109

FEI Number: 65-1133524 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROSS, BYRON
6700 LONE OAK BLVD
NAPLES, FL 34109 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: D ( ) Delete
Name: BATES, MARK
Address: 533 TURTLE HATCH LANE
City-St-Zip: NAPLES, FL 34103

Title: D ( ) Delete
Name: BATES, WILLIAM B
Address: 1230 SHADY REST LANE, #101
City-St-Zip: NAPLES, FL 34103

Title: D ( ) Delete
Name: BATES, BETTY
Address: 1230 SHADY REST LANE, #101
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: BATES, BETTY
Address: 1240 SHADY REST LANE,101
City-St-Zip: NAPLES, FL 34103

Title: VP (X) Change ( ) Addition
Name: MALONEY, JACQUELINE
Address: 1230 SHADY REST LANE, #104
City-St-Zip: NAPLES, FL 34103

Title: S/T (X) Change ( ) Addition
Name: SEIBERT, BARBARA
Address: 1270 SHADY REST LANE, #104
City-St-Zip: NAPLES, FL 34103

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: BYRON ROSS MGR 04/25/2006

Electronic Signature of Signing Officer or Director — Date