

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008027

FILED  
Mar 12, 2011  
Secretary of State

**Entity Name:** HIDDEN LINKS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O CORNERSTONE ASSOCIATION MANAGEMENT INC  
11940 FAIRWAY LAKES DR. SUITE 4  
FORT MYERS, FL 33913

**New Principal Place of Business:**

**Current Mailing Address:**

C/O CORNERSTONE ASSOCIATION MANAGEMENT INC  
11940 FAIRWAY LAKES DR. SUITE 4  
FORT MYERS, FL 33913

**New Mailing Address:**

**FEI Number:** 04-3637604

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHERRY, NASSOIY  
CORNERSTONE ASSOCIATION MANAGEMENT, INC.  
11940 FAIRWAY LAKES DR. SUITE 04  
FORT MYERS, FL 33913 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: BYRNE, JOSEPH  
Address: 12060 BRASSIE BEND UNIT 202  
City-St-Zip: FORT MYERS, FL 33913

Title: DTS  
Name: MCKINLEY, DERALD  
Address: 12072 BRASSIE BEND #102  
City-St-Zip: FORT MYERS, FL 33913

Title: DVP  
Name: SUTHERLAND, ROBERT  
Address: 12021 BRASSIE CIRCLE #201  
City-St-Zip: FORT MYERS, FL 33913

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: SHERRY NASSOIY

RA

03/12/2011

Electronic Signature of Signing Officer or Director

Date