

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002139

FILED
Jan 07, 2010
Secretary of State

Entity Name: HIDDEN LAKES ESTATES OF GROVELAND HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

PREMIER COMMUNITY MANAGERS, INC.
5151 ADANSON ST, STE 103
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

PREMIER COMMUNITY MANAGERS, INC.
5151 ADANSON ST, STE 103
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 01-0648274

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PREMIER COMMUNITY MANAGERS, INC.
5151 ADANSON STREET
SUITE 103
ORLANDO, FL 32804 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: PD
Name: LUKOVICS, LINDA L
Address: 352 HIDDEN VIEW DR
City-St-Zip: GROVELAND, FL 34736

Title: VP
Name: DERIFIELD, DALLAS
Address: 177 HIDDEN VIEW DR
City-St-Zip: GROVELAND, FL 34736

Title: S/T
Name: KLINGBERG, CLAUDIA
Address: 337 HIDDEN VIEW DR
City-St-Zip: GROVELAND, FL 34736

Title: D
Name: KLINGBERG, ULRICH
Address: 337 HIDDEN VIEW DR
City-St-Zip: GROVELAND, FL 34736

Title: D
Name: WATERS, KELLY
Address: 473 ED DOUGLAS RD
City-St-Zip: GROVELAND, FL 34736

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: LINDA LUKOVICS

PRES

01/07/2010

Electronic Signature of Signing Officer or Director

Date