

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001184

FILED
Jan 23, 2012
Secretary of State

Entity Name: WHIDDEN HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

425 OSCEOLA AVE
FROSTPROOF, FL 33843

New Principal Place of Business:

426 HAMLIN LOOP
FROSTPROOF, FL 33843

Current Mailing Address:

425 OSCEOLA AVE
FROSTPROOF, FL 33843

New Mailing Address:

426 HAMLIN LOOP
FROSTPROOF, FL 33843

FEI Number: 30-0176258

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MESSENGER, JEAN
425 OSCEOLA AVE
FROSTPROOF, FL 33843 US

Name and Address of New Registered Agent:

DANCHO, NANCY
426 HAMLIN LOOP
FROSTPROOF, FL 33843 US

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: NANCY K. DANCHO

01/23/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: STD
Name: KNOFSKI, FREDERICK
Address: 440 NAVEL DR
City-St-Zip: FROSTPROOF, FL 33843

Title: D
Name: BOIK, HAROLD
Address: 437 OSCEOLA AVE
City-St-Zip: FROSTPROOF, FL 33843

Title: D
Name: CLANTZ, JOE
Address: 702 DANEY RD
City-St-Zip: FROSTPROOF, FL 33843

Title: D
Name: TRAINER, GEORGE
Address: 415 PAGE AVE
City-St-Zip: FROSTPROOF, FL 33843

Title: D
Name: BRITE, MELVIN
Address: 515 MINNEOLA
City-St-Zip: FROSTPROOF, FL 33843

Title: D
Name: GLENN, EDWARD
Address: 468 HAMLIN LOOP
City-St-Zip: FROSTPROOF, FL 33843

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: NANCY K. DANCHO

MS.

01/23/2012

Electronic Signature of Signing Officer or Director

Date