2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400007709

City-St-Zip:

FILED Apr 25, 2007 Secretary of State

Entity Name: HIDDEN OAKS AT TEMPLE TERRACE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 3434 COLWELL AVENUE SUITE 200 TAMPA, FL 33614 **New Mailing Address: Current Mailing Address:** 3434 COLWELL AVENUE SUITE 200 TAMPA, FL 33614 FEI Number: 20-1547801 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: **RIZZETTA & COMPANY** RIZZETTA & COMPANY, INC. 3434 COLWELL AVENUE 3434 COLWELL AVENUE STE 200 SUITE 200 TAMPA, FL 33614 US TAMPA, FL 33614 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: WILLIAM J. RIZZETTA 04/25/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: VP-D () Delete (X) Change () Addition HORNE, CHAD HECK, JAMES Name: Name: 5439 BEAUMONT CENTER BLVD. STE 1050 Address: 12912 TERRACE SPRINGS DRIVE Address: City-St-Zip: TAMPA, FL 33634 City-St-Zip: TEMPLE TERRACE, FL 33637 Title: ST-D () Delete Title: (X) Change () Addition CORACE, PAUL H Name: MILLER, RONALD Name: Address: 5439 BEAUMONT CENTER BLVD, STE 1050 Address: 12916 TERRACE SPRINGS DRIVE City-St-Zip: TAMPA, FL 33634 City-St-Zip: TEMPLE TERRACE, FL 33637 Title: P-D () Delete Title: (X) Change () Addition VALENTI, BETTY SCOTT, CHRISTOPHER Name: Name: 5439 BEAUMONT CENTER BLVD. STE 1050 8040 TERRACE RIDGE DRIVE Address: Address: City-St-Zip: TAMPA, FL 33634 City-St-Zip: TEMPLE TERRACE, FL 33637 Title: () Delete Title: () Change (X) Addition Name: Name: CLARK, CHASE 8002 TERRACE RIDGE DRIVE Address: Address: City-St-Zip: City-St-Zip: TEMPLE TERRACE, FL 33637 Title: () Delete Title: () Change (X) Addition MURPHY, PETER Name: Name: 13022 TERRACE BROOK PLACE Address: Address:

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

TEMPLE TERRACE, FL 33637

SIGNATURE: JAMES HECK P 04/25/2007