


# 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT # N04000010185**

1. Entity Name  
**HIDDEN LAKE PROPERTY OWNERS ASSOCIATION GROUP, INC.**



FILED  
2007 APR 26 AM 10:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
**730 COMMERCE CENTER DR., STE. C  
SEBASTIAN, FL 32958**

Mailing Address  
**730 COMMERCE CENTER DR., STE. C  
SEBASTIAN, FL 32958**

2. Principal Place of Business - No P.O. Box #  
**4624 PALADIN CIR**

3. Mailing Address  
**4624 PALADIN CIR**

Suite, Apt. #, etc.



04132007 Chg-NP CR2E037 (12/06)

City & State  
**VERO BEACH, FL**

City & State  
**VERO BEACH, FL**

Zip  
**32967** Country  
**IR**

Zip  
**32967** Country  
**IR**

4. FEI Number  
**20-2588608**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**PALADIN, JOSEPH  
730 COMMERCE CENTER DRIVE  
C  
SEBASTIAN, FL 32958**

7. Name and Address of New Registered Agent

Name  
**JOHN C. SCHUTT**

Street Address (P.O. Box Number is Not Acceptable)  
**4624 PALADIN CIRCLE**

City  
**VERO BEACH** FL Zip Code  
**32967**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ **100102236741**  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) **05/14/07--01008--022 \*\*\$61.25**  
DATE

**Amended AR is \$61.25**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

**Make check payable to Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PALADIN, JOSEPH 730 COMMERCE CENTER DR., STE. C SEBASTIAN, FL 32958 <input checked="" type="checkbox"/> Delete <b>JP</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD PALADIN, MICHELE 730 COMMERCE CENTER DR., STE. C SEBASTIAN, FL 32958 <input checked="" type="checkbox"/> Delete <b>MP</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DYKHUIS, ROBERT 730 COMMERCE CENTER DR., STE. C SEBASTIAN, FL 32958 <input checked="" type="checkbox"/> Delete <b>RD</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <b>TS. 5/4/07</b>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Schutt, John C. 4624 Paladin Circle Vero Beach, FL 32967 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Piliere, Frank 4634 Paladin Circle Vero Beach, FL 32967 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Flanagan, Valerie 4635 Paladin Circle Vero Beach, FL 32967 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Johnson, Alisa 4623 Paladin Circle Vero Beach, FL 32967 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	At Large Member Martin, Juvenal 4627 Paladin Circle Vero Beach, FL 32967 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **John C. Schutt** **JOHN C. SCHUTT** **04/19/2007** **772-766-1069**  
Signature and typed or printed name of signing officer or director Date Daytime Phone #