## 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

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DOCUMENT # N04000010185  1. Entity Name HIDDEN LAKE PROPERTY OWNERS ASSOCIATION GROUP, INC.				2	EILED AN 10:00		
Principal Place of Business 730 COMMERCE CENTER DR., STE. C SEBASTIAN, FL 32958  Mailing Address 730 COMMERCE CENTER SEBASTIAN, FL 32958			DR., STE. C		SECRETÉS ÉE. FLORID.		
2. Principal P	PALAD IN C-VR	3. Mailing Address 4624 PRLA	THE CIP				
Suite, Apt.		Suite, Apt. #, etc.	<i>y y c.</i>	04132007 Chg-N	IP CR2E037 (12/06)		
VERU BEACH, FL VERU		City & State VERU BENCE	& State NCU BENCH, FL Country		<del></del>	oplied For ot Applicable	
329	67 Country 1R	32967	Country	5. Certificate of Status	Fee Require		
	6. Name and Address of Current R	egistered Agent		7. Name and Address	of New Registered Agent		
PALADIN, JOSEPH 730 COMMERCE CENTER DRIVE C				SCHUTT (P.O. Box Number is Not Acceptable)			
SEBASTIAN, FL 32958			4624 PALADIN CIRCLE City VERO BEACH FL Zip Code 32967				
8. The above the obligat	named entity submits this statement for tions of registered agent.	the purpose of changing its re	gistered office or re	egistered agent, or both, in the S	FL   329 State of Florida. I am familiar with,	67	
				1001	02236 <b>741</b> -01008022_**61_2		
SIGNATURE.	Signature, typed or printed name of registered agent and	d little if applicable (NOTE: R	legistered Agent signature :		-01008022 **61.2	<u>''</u>	
·	Signature, typed or printed name of registered agent and  Amended AR is \$61.25	9. Election Camp Trust Fund Cor	aign Financing	sequired when reinstating)	-01008022 **61.2  DATE  Make check payable t Florida Department of S		
	Amended AR is \$61.25	9. Election Camp Trust Fund Cor	aign Financing ntribution.	\$5.00 May Be Added to Fees	Make check payable t Florida Department of S	tate	
10.	Amended AR is \$61.25  OFFICERS AND DIRE	9. Election Camp Trust Fund Cor	aign Financing ntribution.	\$5.00 May Be Added to Fees	Make check payable t Florida Department of S O OFFICERS AND DIRECTORS IN	tate	
10.	Amended AR is \$61.25  OFFICERS AND DIRE	9. Election Camp Trust Fund Cor	aign Financing ntribution.	\$5.00 May Be Added to Fees	Make check payable t Florida Department of S	tate	
10. DILE NAME	Amended AR is \$61.25  OFFICERS AND DIRE PD PALADIN, JOSEPH	9. Election Camp Trust Fund Cor	aign Financing ntribution.   11.  TITLE NAME	\$5.00 May Be Added to Fees	Make check payable t Florida Department of S O OFFICERS AND DIRECTORS IN	tate	
10.	Amended AR is \$61.25  OFFICERS AND DIRE PD PALADIN, JOSEPH 730 COMMERCE CENTER DR., S	9. Election Camp Trust Fund Cor	aign Financing ntribution.   11.  TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees	Make check payable t Florida Department of S O OFFICERS AND DIRECTORS IN	tate	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Amended AR Is \$61.25  OFFICERS AND DIRE PD PALADIN, JOSEPH 730 COMMERCE CENTER DR., S SEBASTIAN, FL 32958	9. Election Camp Trust Fund Cor CCTORS  Delete	aign Financing ntribution.  11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	\$5.00 May Be Added to Fees  ADDITIONS/CHANGES To	Make check payable t Florida Department of S O OFFICERS AND DIRECTORS IN	tate  10 Addition	
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10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DIRE PD PALADIN, JOSEPH 730 COMMERCE CENTER DR., S SEBASTIAN, FL 32958 VSD PALADIN, MICHELE 730 COMMERCE CENTER DR., S SEBASTIAN, FL 32958 TD	9. Election Camp Trust Fund Cor CCTORS  Delete  TE. C	aign Financing ntribution.   11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	\$5.00 May Be Added to Fees  ADDITIONS/CHANGES TO  President Schutt, John C. 4624 Paladin Circle Vero Beach, FL 3296' Vice President	Make check payable t Florida Department of S  O OFFICERS AND DIRECTORS IN  Change	tate  10 Addition	
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110.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DIRE PD PALADIN, JOSEPH 730 COMMERCE CENTER DR., S SEBASTIAN, FL 32958 VSD PALADIN, MICHELE 730 COMMERCE CENTER DR., S SEBASTIAN, FL 32958 TD DYKHUIS, ROBERT 730 COMMERCE CENTER DR., S SEBASTIAN, FL 32958	9. Election Camp Trust Fund Cor  ECTORS  Delete  TE. C  Delete  TE. C  Delete  TE. C  Delete	aign Financing ntribution.  11.  111.  111.  111.  111.  NAME STREET ADDRESS CITY-ST-ZIP  111.E NAME STREET ADDRESS CITY-ST-ZIP	President Schutt, John C. 4624 Paladin Circle Vero Beach, FL 3296 Treasurer Flanagan, Valerie 4635 Paladin Circle Vero Beach, FL 32967 Secretary Johnson, Alisa 4623 Paladin Circle Vero Beach, FL 32967 Secretary Johnson, Alisa 4623 Paladin Circle Vero Beach, FL 32967 At Large Member Martin, Juvenal 4627 Paladin Circle	Make check payable t Florida Department of S  O OFFICERS AND DIRECTORS IN  Change  Change  Change	tate  10 Addition  Addition	
110.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE PD PALADIN, JOSEPH 730 COMMERCE CENTER DR., S SEBASTIAN, FL 32958 VSD PALADIN, MICHELE 730 COMMERCE CENTER DR., S SEBASTIAN, FL 32958 TD DYKHUIS, ROBERT 730 COMMERCE CENTER DR., S SEBASTIAN, FL 32958	9. Election Camp Trust Fund Cor  ECTORS  Delete  TE. C  Delete  TE. C  Delete  Delete	aign Financing ntribution.  11.  TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP	President Schutt, John C. 4624 Paladin Circle Vero Beach, FL 3296 Treasurer Flanagan, Valerie 4635 Paladin Circle Vero Beach, FL 32967 Secretary Johnson, Alisa 4623 Paladin Circle Vero Beach, FL 32967 At Large Member Martin, Juvenal 4627 Paladin Circle Vero Beach, FL 32967	Make check payable to Florida Department of Stoto Officers and directors in Change  Change  Change  Change  Change	tate  10 Addition  Addition  Addition	

12. Thereby certify that the information supplied with this filling does not quality 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:

| OHIO SCHUTT OHIO OF DOMESTIC O