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May 08 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N08128 (3)
1. Corporation Name
HIDDEN LAKE OWNERS' ASSOCIATION, INC.

Principal Place of Business: 7304 NW 21ST WAY, GAINESVILLE FL 32653
Mailing Address: 7304 NW 21ST WAY, GAINESVILLE FL 32653

3. Date Incorporated or Qualified: 03/13/1985
4. FEI Number: 59-2698301
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business (21-24) and Mailing Address (25-30) details including Suite, Apt. #, etc., City & State, Zip, and Country.

9. Name and Address of Current Registered Agent: KASNIC, MARTHA L, 7303 N.W. 21ST WAY, GAINESVILLE FL 32653

10. Name and Address of New Registered Agent: HART, Anna Laurie, 7319 NW 21ST CT., Gainesville, FL 32653

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: *Anna Laurie Hart* Anna Laurie Hart 4/29/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D
NAME	JAMES, ROBERT E	1.2 NAME	Hart, Anna Laurie
STREET ADDRESS	7322 N.W. 21ST CT	1.3 STREET ADDRESS	7319 NW 21ST CT.
CITY-ST-ZIP	GAINESVILLE FL	1.4 CITY-ST-ZIP	Gainesville, FL 32653
TITLE	D	2.1 TITLE	D
NAME	SCHULTZ, RICHARD	2.2 NAME	Watts, Cynthia
STREET ADDRESS	2120 N.W. 74TH PL	2.3 STREET ADDRESS	2128 NW 74th Pl.
CITY-ST-ZIP	GAINESVILLE FL	2.4 CITY-ST-ZIP	Gainesville, FL 32653
TITLE	T/D	3.1 TITLE	D
NAME	KASNIC, MARTHA L	3.2 NAME	Fort, Guerian
STREET ADDRESS	7303 NW 21ST WAY	3.3 STREET ADDRESS	7234 NW 21ST Way
CITY-ST-ZIP	GAINESVILLE FL 32653	3.4 CITY-ST-ZIP	Gainesville, FL 32653
TITLE	D	4.1 TITLE	D
NAME	WALKOWIAK, BERNICE R	4.2 NAME	Eddins Barbara
STREET ADDRESS	2135 N.W. 72ND PL	4.3 STREET ADDRESS	2114 NW 72nd Pl.
CITY-ST-ZIP	GAINESVILLE FL	4.4 CITY-ST-ZIP	Gainesville, FL 32653
TITLE	D	5.1 TITLE	D
NAME	SHIRVIN, KAREN A	5.2 NAME	Brownett, Mary L.
STREET ADDRESS	7308 N.W. 21ST WAY	5.3 STREET ADDRESS	7323 NW 21ST CT.
CITY-ST-ZIP	GAINESVILLE FL	5.4 CITY-ST-ZIP	Gainesville, FL 32653
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Martha L. Kasnic* Martha L. Kasnic 4/29/98 (352) 373-5060

CR2E037 (10/97)