2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 23, 2006 8:00 am Secretary of State

DOCUMENT # N16424 1. Entity Name HIDDEN OAK ESTATES HOMEOWNERS ASSOCIATION, INC.						O.	1-23-2006 90116	301961	.23	
Principal Place of Business P.O. BOX 522093 LONGWOOD, FL 32752-9093			Mailing Address P.O. BOX 522093 LONGWOOD, FL 32752-9093		•					
2. Principal Place of Business			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			01042006 C	- ND - CDC	DE007 (44(0E)		
City & State			City & State			4. FEI Number	hg-NP CR2	2E037 (11/05)	plied For	
						59-2791646 Not Applicable				
Zíp Country		Zíp Country			5. Certificate of St	atus Desired	\$8.75 Add Fee Require			
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent Name Name Name Name Name Name Name Name					
STANLEY, ANDREW					Nonda Mena					
914 BUCKSAW PL LONGWOOD, FL 32750				Street	Street Address (P.O. Box Number is Not Acceptable) acce					
LONGWOOD, FE 32730					<u>577</u>	5000L	FI			
				City		3	l	FL Zip Cod	750	
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 Monda Mena 1-406										
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstaling) DATE										
							1			
	Filing Fee Due by Ma	y 1, 2006	Trust Fund C			\$5.00 May Be Added to Fees	Florida De	heck payable to epartment of Si	tate	
10.	Due by Ma		Trust Fund C	ontribution.	/	Added to Fees ADDITIONS/CHANG	1	epartment of Si	10	
10. TITLE NAME	_	y 1, 2006 OFFICERS AND DI	Trust Fund C	ontribution.	/	Added to Fees	Florida De	epartment of Si	tate	
TITLE NAME STREET ADORESS	DP DECARLO, 1011 CROS	y 1, 2006 OFFICERS AND DI RICK S OUT WAY	Trust Fund C	TITLE NAME STREET ADDRESS	/	Added to Fees ADDITIONS/CHANG	Florida De	epartment of Si	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DECARLO, 1011 CROS LONGWOO	y 1, 2006 OFFICERS AND DI RICK S OUT WAY	Trust Fund C	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pr	Added to Fees ADDITIONS/CHANG	Florida De	epartment of Si	tate 10 Addition	
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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.

1-6-06

407-265-8032