

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 23, 2007 8:00 am**  
**Secretary of State**

02-23-2007 90039 041 \*\*\*\*61.25

**DOCUMENT # N18333**

1. Entity Name

**HIDDEN CREEK OF SEBRING PROPERTY OWNERS' ASSOCIATION, INC.**



Principal Place of Business

**2525 HIDDEN CREEK CIRCLE  
SEBRING FL 33870**

Mailing Address

**2525 HIDDEN CREEK CIRCLE  
SEBRING FL 33870**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

**59-2550774**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LEEDY, RALPH R  
2419 HIDDEN CREEK CIR  
SEBRING FL 33870**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature of registered agent and title if applicable.

Registered Agent signature required when reinstating.

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2007**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete  
NAME BYRD, JIM  
STREET ADDRESS 2200 HIDDEN CREEK CIR  
CITY-ST-ZIP SEBRING FL 33870

TITLE PD ☒ Change ☐ Addition  
NAME BELCHER, DON  
STREET ADDRESS 2300 HIDDEN CREEK CIR.  
CITY-ST-ZIP SEBRING, FL. 33870

TITLE T ☒ Delete  
NAME MITCHELL, DONALD L  
STREET ADDRESS 2524 HIDDEN CREEK CIRCLE  
CITY-ST-ZIP SEBRING FL 33870

TITLE T ☒ Change ☐ Addition  
NAME GALLAGHER, MARY C.  
STREET ADDRESS 2530 HIDDEN CREEK CIR  
CITY-ST-ZIP SEBRING, FLA. 33870

TITLE VD ☒ Delete  
NAME CARPENTER, JOHN J  
STREET ADDRESS 2415 HIDDEN CREEK CIRCLE  
CITY-ST-ZIP SEBRING FL 33870

TITLE D ☒ Change ☐ Addition  
NAME GALLAGHER, DONALD W.  
STREET ADDRESS 2530 HIDDEN CREEK CIR.  
CITY-ST-ZIP SEBRING, FLA. 33870

TITLE S/D ☐ Delete  
NAME MARCHANT, MARGARET M  
STREET ADDRESS 2412 HIDDEN CREEK CIRCLE  
CITY-ST-ZIP SEBRING FL 33870

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME LEEDY, RALPH R  
STREET ADDRESS 2418 HIDDEN CREEK CIR  
CITY-ST-ZIP SEBRING FL 33870

TITLE VD ☐ Change ☐ Addition  
NAME LEEDY, RALPH R.  
STREET ADDRESS 2418 HIDDEN CREEK CIR (NEW TITLE)  
CITY-ST-ZIP SEBRING, FL. 33870

TITLE D ☒ Delete  
NAME STUBER, ELTON A  
STREET ADDRESS 2218 HIDDEN CREEK CIR  
CITY-ST-ZIP SEBRING FL 33870

TITLE D ☒ Change ☐ Addition  
NAME VAN HOUTEN, RON  
STREET ADDRESS 2694 RODWAY ST.  
CITY-ST-ZIP SEBRING, FLA 33870

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

*Margaret Marchant, Secretary*

2-16-07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #