


FILE NOW: FILING FEE IS \$61.25

FILED

Mar 13 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham <i>f</i> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N20358 (0)
1. Corporation Name
HIDDEN GOLF CLUB HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business 556 RACHET DR., NE WINTER HAVEN FL 33881	Mailing Address 556 RACHET DR., NE WINTER HAVEN FL 33881-8752
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/28/1987	3a. Date of Last Report 02/20/1996
21	22	23	24	25	26
4. FEI Number 59-2796446		Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent DAMONTE, JONATHAN JAMES FORTUNE SAVINGS BANK STE 206 7800-113TH N GEMINOLE FL 34642				10. Name and Address of New Registered Agent	
81 Name Damonte, Jonathan James		82 Street Address (P.O. Box Number is Not Acceptable) 12110 Seminole Blvd.			
83		84 City Largo			
		85 State FL		86 Zip Code 33778	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	VP	DELETE		TITLE	Change		Addition
NAME	LYLE, ALLEN	Anita Olinger		2.1 TITLE	Change		Addition
STREET ADDRESS	526 CENTURY DRIVE	598 Century Dr.		2.2 NAME	Change		Addition
CITY-ST-ZIP	WINTER HAVEN FL	WINTER HAVEN, FL. 33881		2.3 STREET ADDRESS	Change		Addition
TITLE	D	DELETE		2.4 CITY-ST-ZIP	Change		Addition
NAME	DELINEK, FRANK			3.1 TITLE	Change		Addition
STREET ADDRESS	528 CENTURY DR			3.2 NAME	Change		Addition
CITY-ST-ZIP	WINTER HAVEN FL			3.3 STREET ADDRESS	Change		Addition
TITLE	D	DELETE		3.4 CITY-ST-ZIP	Change		Addition
NAME	RUMPLE, BILL			4.1 TITLE	Change		Addition
STREET ADDRESS	832 SANDTRAP CIRCLE			4.2 NAME	Change		Addition
CITY-ST-ZIP	WINTER HAVEN FL			4.3 STREET ADDRESS	Change		Addition
TITLE	D	DELETE		4.4 CITY-ST-ZIP	Change		Addition
NAME	WEAVER, CHARLES			5.1 TITLE	Change		Addition
STREET ADDRESS	823 BUNKER CR			5.2 NAME	Change		Addition
CITY-ST-ZIP	WINTER HAVEN FL			5.3 STREET ADDRESS	Change		Addition
TITLE	D	DELETE		5.4 CITY-ST-ZIP	Change		Addition
NAME	COOLEY, MARILYN			6.1 TITLE	Change		Addition
STREET ADDRESS	912 BRIDIE COURT			6.2 NAME	Change		Addition
CITY-ST-ZIP	WINTER HAVEN FL			6.3 STREET ADDRESS	Change		Addition
TITLE	D	DELETE		6.4 CITY-ST-ZIP	Change		Addition
NAME	COOPER, PAUL			7.1 TITLE	Change		Addition
STREET ADDRESS	569 RACKET DR			7.2 NAME	Change		Addition
CITY-ST-ZIP	WINTER HAVEN FL			7.3 STREET ADDRESS	Change		Addition
				7.4 CITY-ST-ZIP	Change		Addition

14. I do 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: *Wagner* 3-6-97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAYTIME PHONE # 0054713

CR2E037 (9/96)