


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT CORPORATION ANNUAL REPORT <b>1996</b>		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N27551** (3)

1. Corporation Name

**THE HIDDEN CREEK ESTATES PROPERTY OWNERS ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

~~644 S. MILITARY TRAIL~~  
**DEERFIELD BEACH FL 33442**  
US

~~644 S. MILITARY TRAIL~~  
**DEERFIELD BEACH FL 33442**  
US



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.  
22 **664 S. Military Trail**

26 Suite, Apt. #, etc.  
27 **664 S. Military Trail**

23 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

3. Date Incorporated or Qualified

**07/22/1988**

3a. Date of Last Report

**09/18/1995**

4. FEI Number

**65-0100681**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution

☐

**\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

**STOVALL, MICHAEL T**  
**664 S. MILITARY TRAIL**  
**DEERFIELD BEACH FL 33442**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

**FL**

85

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE  
NAME **BLAKE, GERALD**  
STREET ADDRESS ~~644 MILITARY TRAIL~~  
CITY-ST-ZIP **DEERFIELD BEACH FL 33442**

TITLE **DV** ☐ DELETE  
NAME **FORRER, JOHN O.**  
STREET ADDRESS ~~644 S. MILITARY TRAIL~~  
CITY-ST-ZIP **DEERFIELD BEACH FL 33442**

TITLE **D** ☐ DELETE  
NAME **STOVALL, MICHAEL T**  
STREET ADDRESS ~~644 S. MILITARY TRAIL~~  
CITY-ST-ZIP **DEERFIELD BEACH FL 33442**

TITLE **VTS** ☐ DELETE  
NAME **BRACKEN, CYNTHIA M**  
STREET ADDRESS ~~644 S. MILITARY TRAIL~~  
CITY-ST-ZIP **DEERFIELD BEACH FL 33442**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

**664 S. Military Trail**

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

**664 S. Military Trail**

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

**664 S. Military Trail**

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

**664 S. Military Trail**

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☒ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**6/19/96**

954-419-1011

Date

Daytime Phone #

CR2E037 (3/96)