## **2006 NOT-FOR-PROFIT CORPORATION**

## **ANNUAL REPORT**

## **DOCUMENT # N31833**

1. Entity Name
HIDDEN OAKS HOMEOWNERS' ASSOCIATION OF



## **FILED** Jul 19, 2006 8:00 am Secretary of State 07-19-2006 90009 040 \*\*\*\*70.00

INDIAN F	RIVER COUNTY, INC.			<b>′</b>			
112 38TH COURT P.O.		Mailing Address P.O. BOX 1463 VERO BEACH, FL 32961	O. BOX 1463		20049611		
2. Principal P	Place of Business	3. Mailing Address	Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		IP CR2E037 (4	1/06)	
City & State		City & State		4. FEI Number 65-0577876		Applied For Not Applicable	
Zip	Country	Zip.	Country	5. Certificate of Status		<b>'5</b> Additional Required	
	6. Name and Address of Curren	t Registered Agent		7. Name and Address	of New Registered Agent		
TURNER, 112 38TH VERO BEA			Name Street Address	(P.O. Box Number is Not A	Acceptable)		
			City		FL	ip Code	
8. The above the obligat SIGNATURE	named entity submits this statement fillions of registered agent.  Signature, typed or printed name of registered agen		gistered office or regist		State of Florida. I am familia	ar with, and accept	
Filing Fee Is \$61.25  Due by September 6, 2006  9. Election Campa Trust Fund Con				\$5.00 May Be Added to Fees  Make check payable to Florida Department of State			
10.	OFFICERS AND D	RECTORS	11.	ADDITIONS/CHANGES TO	O OFFICERS AND DIRECTO	ORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TURNER, SCOTT 112 38TH COURT VERO BEACH, FL 32968	☑ Delete	NAME Ph.	esident ilip Flyan o Beach, Fl	_	hange Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BENTLAGE, BILL 109 38TH COURT VERO BEACH, FL 32968	■ Delete	NAME SCA STREET ADDRESS 112	e President ott Turner 1 38 ° ct.		hange Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD COPPER, DIANE 120 38TH COURT VERO BEACH, FL 32968	☑ Delete	TITLE SCC NAME JAP	retary nai Cooper 0 38 m ct. Vero Bearle.		hange Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD POTEAT, JULIE 108 38TH COURT VERO BEACH, FL 32968	☑ Delete	NAME LIST	asurer Petrulal 1 38th Ct. 100 Beach, F	□ c	hange 🖪 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			hange Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET ADDRESS CITY ST. 7/B		c	hange Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 charged, or on an attachment with an address with all other like empowered.

SIGNATURE:

TED NAME OF SIGNING OFFICER OR DIRECTOR