2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2010
Secretary of State

DOCUMENT# N48872

Entity Name: HIDDEN ISLAND ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

7802 HIDDEN ISLAND LANE
TEMPLE TERRACE, FL 33617 US

New Principal Place of Business:

Current Mailing Address:

7802 HIDDEN ISLAND LANE
TEMPLE TERRACE, FL 33617 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCCORMICK, SUSAN
7802 HIDDEN ISLAND LANE
TEMPLE TERRACE, FL 33617 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D
Name: BOSS, RICHARD/ELINOR
Address: 7804 HIDDEN ISLAND LANE
City-St-Zip: TEMPLE TERRACE, FL

Title: PTS
Name: MCCORMICK, CARL OR SUSAN
Address: 7802 HIDDEN ISLAND LN
City-St-Zip: TEMPLE TERRACE, FL

Title: P
Name: CRISSMAN, THOMAS/ULE
Address: 7808 HIDDEN ISLAND LN
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D
Name: TAYLOR, BILL/DONNA
Address: 7806 HIDDEN ISLAND LN
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D
Name: APRILE, DANNY/ANGELA
Address: 7810 HIDDEN ISLAND LANE
City-St-Zip: TEMPLE TERRACE, FL 33617

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: SUSAN MCCORMICK PTS 04/03/2010
Electronic Signature of Signing Officer or Director Date