

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 13, 2009
Secretary of State**

DOCUMENT# N93000002401

Entity Name: HIDDEN LAKES HOMEOWNERS' ASSOCIATION OF OKALOOSA COUNTY, INC.

Current Principal Place of Business:

1572 HIDDEN LAKES CT
NICEVILLE, FL 32578

New Principal Place of Business:

Current Mailing Address:

PO BOX 427
NICEVILLE, FL 32578

New Mailing Address:

FEI Number: 59-3198523 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

READDY, WILLIAM J
1572 HIDDEN LAKES CT
NICEVILLE, FL 32578 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: PD () Delete
Name: TENZYCKI, MIKE
Address: 4331 HIDDEN LAKES DR
City-St-Zip: NICEVILLE, FL 32578

Title: VP () Delete
Name: BATEMAN, DONNA
Address: 4339 HIDDEN LAKES DR
City-St-Zip: NICEVILLE, FL 32578

Title: T () Delete
Name: READDY, WILLIAM J
Address: 1572 HIDDEN LAKES CT
City-St-Zip: NICEVILLE, FL 32578

Title: S () Delete
Name: MOORE, LORI
Address: 4343 HIDDEN LAKES CT
City-St-Zip: NICEVILLE, FL 32578

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: TRISCHIER, PHIL
Address: 4317 HIDDEN LAKES DR
City-St-Zip: NICEVILLE, FL 32578

Title: PD (X) Change () Addition
Name: BATEMAN, DONNA
Address: 4339 HIDDEN LAKES DR
City-St-Zip: NICEVILLE, FL 32578

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: WILLIAM J READDY

T

04/13/2009

Electronic Signature of Signing Officer or Director

Date