## 2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N95000000212

FILED Oct 08, 2012 Secretary of State

Entity Name: HIDEAWAY COVE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

4609 VINELAND RD SECOND FLOOR 4609 VINELAND RD

2ND FLOOR 2ND FLOOR

ORLANDO, FL 32811 ORLANDO, FL 32811 US

**Current Mailing Address:** New Mailing Address:

4609 VINELAND RD SECOND FLOOR 4609 VINELAND RD

2ND FLOOR 2ND FLOOR

ORLANDO, FL 32811 US ORLANDO, FL 32811 US

FEI Number: 45-3697843 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PIERRE, SCOTT R ESQ PIERRE, SCOTT R 4609 VINELAND ROAD, 2ND FLOOR 4609 VINELAND ROAD 2ND FLOOR 2ND FLOOR ORLANDO, FL 32811 US ORLANDO, FL 32811 US

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.

10/08/2012 SIGNATURE: SCOTT R. PIERRE

> Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:** 

PIERRE, SCOTT R Name:

Address: 4609 VINELAND ROAD, 2ND FLR.

City-St-Zip: ORLANDO, FL 32811

Title:

Name: VANKAMPEN-PIERRE, KARLA M Address: 4609 VINELAND ROAD, 2ND FLR.

City-St-Zip: ORLANDO, FL 32811 US

Title:

TISCH, DEAN W Name:

4609 VINELAND ROAD, 2ND FLOOR Address:

City-St-Zip: ORLANDO, FL 32811

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: SCOTT R. PIERRE PD 10/08/2012