

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003653

FILED  
Apr 06, 2010  
Secretary of State

**Entity Name:** HIDDEN OAKS OF HILLSBOROUGH COUNTY HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 327795044

**New Principal Place of Business:**

**Current Mailing Address:**

2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 327795044

**New Mailing Address:**

**FEI Number:** 59-3338637

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HART, JAMES W JR  
SENTRY MANAGEMENT INC  
2180 WEST SR 434 SUITE 5000  
LONGWOOD, FL 327795044 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  
Name: HARDIN, ELIZABETH  
Address: 4523 HIDDEN SHADOW DR  
City-St-Zip: TAMPA, FL 33614

Title: TD  
Name: DAUBERT, KEVIN  
Address: 4603 HIDDEN SHADOW DRIVE  
City-St-Zip: TAMPA, FL 33614

Title: VPD  
Name: ORTIZ, PEGGY  
Address: 4643 HIDDEN SHADOW DR  
City-St-Zip: TAMPA, FL 33614

Title: SD  
Name: GARCIA, JEANETTE  
Address: 4526 HIDDEN SHADOW DRIVE  
City-St-Zip: TAMPA, FL 33614

Title: D  
Name: MARQUE, ANDRE  
Address: 4418 HIDDEN SHADOW DR  
City-St-Zip: TAMPA, FL 33614

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: ELIZABETH HARDIN

PD

04/06/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date