

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000610

FILED
Apr 21, 2006
Secretary of State

Entity Name: HIDDEN PINES AT COUNTRYSIDE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3060 ALTERNATE 19 N
SUITE B-15
PALM HARBOR, FL 346831929 US

New Principal Place of Business:

905 E. MARTIN LUTHER KING, JR. DR.
SUITE 570
TARPON SPRINGS, FL 34689 US

Current Mailing Address:

3060 ALTERNATE 19 N
SUITE B-15
PALM HARBOR, FL 346831929 US

New Mailing Address:

905 E. MARTIN LUTHER KING, JR. DR.
SUITE 570
TARPON SPRINGS, FL 34689 US

FEI Number: 59-3383992

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHETZEL, TERRI B
3060 ALTERNATE 19 NORTH
B-15
PALM HARBOR, FL 346831929 US

Name and Address of New Registered Agent:

WHETZEL, TERRI B
905 E. MARTIN LUTHER KING, JR. DR.
SUITE 570
TARPON SPRINGS, FL 34689 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.

SIGNATURE:

04/21/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HAMILTON, DAVID
Address: 2482 HICKMAN CIRCLE
City-St-Zip: CLEARWATER, FL 337612975 US

Title: VPD () Delete
Name: PADAGS, ERIC H
Address: 2469 HICKMAN CIRCLE
City-St-Zip: CLEARWATER, FL 337612990 US

Title: STD () Delete
Name: BLACKMORE, KIMBERLY A
Address: 2467 HICKMAN CIRCLE
City-St-Zip: CLEARWATER, FL 337612990 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GRIMSDALE, GAIL N
Address: 2477 HIDDEN PINES LANE
City-St-Zip: CLEARWATER, FL 33761 US

Title: VPD (X) Change () Addition
Name: AHNEMILLER, BARBARA
Address: 2459 HICKMAN CIRCLE
City-St-Zip: CLEARWATER, FL 33761 US

Title: STD (X) Change () Addition
Name: READEY, JOCELYN V
Address: 2469 HICKMAN CIRCLE
City-St-Zip: CLEARWATER, FL 33761 US

I hereby certify that the information supplied with this filing does not qualify for the 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: JOCELYN V. READEY

STD

04/21/2006

Electronic Signature of Signing Officer or Director

Date