2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

				7 Fab 17 200	6 08.00	A M	
DOCUMENT # N9900006415  1. Entity Name				Feb 17, 2006 08:00 AM Secretary of State			
HIDDEN I FL., INC.	LAKE HOMEOWNERS ASS	SOCIATION OF HAVAN	A V				
Principal Plac	e of Business	Mailing Address					
7765 HAVANA HWY.		7765 HAVANA HWY.					
HAVANA FI	. 32333	HAVANA FL 32333					
2. Principal Place of Business		3. Mailing Address			Bant Bana aint Brast trest an	1161 61 1861	
Suite. Apt. #, etc.		Suite, Apt. #, etc.		1st MOORE CF	R2E037 (10/05)		
City & State		City & State		4. FEI Number 59-3394538	No	plied For t Applicat	
Zip Country		Zip Country		5. Certificate of Status Desired \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent				7. Name and Address of New Regi	stered Agent		
HARRELL, ROBERT C 7765 HAVANA HWY.			Name Street Address	Street Address (P.O. Box Number is Not Acceptable)			
HAVANA FL 32333				···- ··· · · · · · · · · · · · · · · ·			
			City		FL Zip Code	3	
8. The above	named entity submits this statement ions of registered agent.	for the purpose of changing its re	gistered office or regist	ered agent, or both, in the State of Florid	a. I am tamiliar with,	and accep	
SIGNATURE	Signature, typied or priviled name of registered age	nn and title if appreadle [NOTK: 1	Ragistared Agent eignature requir	ed when terralaling)	DATE		
				The same of the same		1	
	FILE NOW: FEE IS \$61,25 Due By May 1, 2006	9. Election Camp Trust Fund Co			Check Payable		
	Due by may 1, 2009		nondator.	Added to Fees Florida	Department of S	usie	
10.	OFFICERS AND C	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN	10	
mle	PTD	☐ Delete	TITLE		☐ Change	Addition	
NAME STREET ADDRESS	HARRELL, ROBERT C		NAME STREET ADDRESS	U000004331	21		
CITY-ST-ZIP	HAVANA FL 32333	_	CITY-ST-ZIP	03/01/06-0003	34-001 70.00		
DATE	D	☐ Delete	INITE .		— - ☐ Change	Adding	
NAME	HARRELL, SANDRA D		NAME		-		
	7765 HAVANA HWY.		STREET ADDRESS				
CITY-ST-ZIP	HAVANA FL 32333		CITY-ST-ZIP				
TITLE NAME	D  HARRELL, CHRIS	☐ Delete	TITLE NAME		Change	Additi.	
STREET ADDRESS	7765 HAVANA HWY.		STREET ADDRESS				
CITY-ST-ZIP	HAVANA FL 32333	••	CITY-ST-ZIP				
UTLE		☐ Delete	TATLE		☐ Change	Addition	
NAME			NAME				
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS				
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STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP				
TITLE		☐ Detete	TITLE		Change	<b>□</b> AA##	
NAME			NAME				
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP	and the three terminations of the second	Calculation districts and a second second	CITY-ST-2IP			_	
indicated	certify that the information supplied vi on this report or supplemental report	vius this tiling does not quality for t is true and accurate and that my	me exemptions confain signature shall have the	ned in Section 119, Florida Statutes. I fui e same legal effect as if made under pat	ther certify that the in h; that I am an officer	or director	
if change	puration of the receiver of trustee end, or on an attachment with an addition	ripowered to execute this report (ess, with all other like empowered	as required by Unapter ( d.	ted in Section 119, Florida Statutes, 110, e same legal effect as if made under oat 617, Florida Statutes; and that my name	appears in Block 10 c	a RIOCK I.	

**FILED** 

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