

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000107498

FILED
Jul 14, 2008
Secretary of State

Entity Name: HIDDEN KEY MANAGEMENT COMPANY, INC.

Current Principal Place of Business:

33354 SUNNY PARKE CIRCLE
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

Current Mailing Address:

33354 SUNNY PARKE CIRCLE
FERNANDINA BEACH, FL 32034

New Mailing Address:

FEI Number: 26-1227880 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JONES, AMANDA
Address: 33354 SUNNY PARKE CIRCLE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: VP () Delete
Name: JONES, JAMES
Address: 33354 SUNNY PARKE CIRCLE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: T () Delete
Name: JONES, AMANDA
Address: 33354 SUNNY PARKE CIRCLE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: S () Delete
Name: JONES, AMANDA
Address: 33354 SUNNY PARKE CIRCLE
City-St-Zip: FERNANDINA BEACH, FL 32034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: S (X) Change () Addition
Name: LARUE, JEAN
Address: 33354 SUNNY PARKE CIRCLE
City-St-Zip: FERNANDINA BEACH, FL 32034

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES R. JONES

VP

07/14/2008

Electronic Signature of Signing Officer or Director

_____ Date