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PROFIT •
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9500060612 (5)

HIDDEN CREEK VILLAS, INC.

FILED
May 19 1997 8:00am
Secretary of State

Principal Place of Business 3300 COUTH HAWASSEE RD. SUITE 107 ORLANDO FL 32835 US		Mailing Address  3360 SOUTH HIMASSEE RD. SUITE 107 ORLANDO PL 32835-8350 US		A Data least restricted as Qualified 1.20 Data of Last Bones				
				3. Date Incorporated or Qualified 07/18/1995	3a. Date of Last Report 05/01/1996			
2. Principal P	lace of Business	2a. Mailing Address 26 P.O. BOX	4961		4. FEI Number 59-3291011		Ap	plied For t Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re	Additional
City & Stat	0	City & State	FL		Election Campaign Financing     Trust Fund Contribution		\$5.00 Added t	
Zip	Country 25		30 Cou	ntry USA	8. This corporation has liability for Florida Statutes			. 199.032,
	9. Name and Address of Cur			81 Name	10. Name and Address of New R	egistered /	igent	
390 SUN	CORPORATE SERVICES OF N. ORANGE AVENUE TE 1100 ANDO FL 32801	CENTRAL FL.,INC.			ress (P.O. Box Number is Not Accepta	ible)	·	······································
•				84 City		FL	<b>85</b> Zip	Code
office or r agent ta SIGNATURE	Signature, typed or printed name of registered			d by the corpora utes. d Agent signature requi	poration submits this statement for the tion's board of directors. I hereby accelling when reinstating)  ADDITIONS/CHANGES TO OFF	DATÉ		
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4. Loo hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on the annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director pritity corporation or the receiver or trustee ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or flight 3 if changed in the receiver of the receiver

SIGNATURE:

HE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2 c Tow 4/25/19

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