

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000106778

FILED
Mar 06, 2009
Secretary of State

Entity Name: HIDDEN LAKES DEVELOPMENT CO., INC.

Current Principal Place of Business:

4550 TILTON CT.
FORT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

4550 TILTON CT.
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 65-0882245 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONLYN, ANDREW
4550 TILTON CT.
FORT MYERS, FL 33907 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CONLYN, ANDREW
Address: 4550 TILTON CT.
City-St-Zip: FORT MYERS, FL 33907

Title: S () Delete
Name: LARREAU, SUE
Address: 21509 GLORY RD.
City-St-Zip: LUTZ, FL 33549

Title: T () Delete
Name: HOTALING, DEAN
Address: 2016 LINDA LN.
City-St-Zip: LUTZ, FL 33549

Title: V () Delete
Name: HITZEMAN, RUSSELL
Address: 3619 BARBADOS DR.
City-St-Zip: AUGUSTA, GA 30909

Title: VF () Delete
Name: TALBOTT, RALPH
Address: 13 TURTLE BACK TRAIL
City-St-Zip: PONTE VERDA BEACH, FL 33760

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: V (X) Change () Addition
Name: HITZEMAN, RUSSELL L
Address: 3619 BARBADOS DR.
City-St-Zip: AUGUSTA, GA 30909

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

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: RUSSELL L HITZEMAN

V

03/06/2009

Electronic Signature of Signing Officer or Director

_____ Date