

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000007709

**Entity Name:** HIDDEN OAKS AT TEMPLE TERRACE HOMEOWNERS' ASSOCIATION, INC.**FILED**  
**Apr 23, 2014**  
**Secretary of State**  
**CC1727033888****Current Principal Place of Business:**3434 COLWELL AVENUE  
SUITE 200  
TAMPA, FL 33614**Current Mailing Address:**3434 COLWELL AVENUE  
SUITE 200  
TAMPA, FL 33614 US**FEI Number: 20-1547801****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**RIZZETTA & COMPANY, INC.  
3434 COLWELL AVENUE  
SUITE 200  
TAMPA, FL 33614 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	TREASURER
Name	HECK, JAMES
Address	3434 COLWELL AVENUE, SUITE 200
City-State-Zip:	TAMPA FL 33614

Title	DIRECTOR
Name	BARAKAT, AYMAN
Address	3434 COLWELL AVENUE, SUITE 200
City-State-Zip:	TAMPA FL 33614

Title	PRESIDENT
Name	DAVISON, WILLIAM
Address	3434 COLWELL AVENUE, SUITE 200
City-State-Zip:	TAMPA FL 33614

Title	VP
Name	BARBOUR, DENNIS
Address	3434 COLWELL AVENUE SUITE 200
City-State-Zip:	TAMPA FL 33614

Title	SECRETARY
Name	GOMEZ, JUAN
Address	3434 COLWELL AVENUE SUITE 200
City-State-Zip:	TAMPA FL 33614

I hereby 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 all other like empowered.

**SIGNATURE: WILLIAM DAVISON****PRESIDENT****04/23/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date