

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

DOCUMENT# N06000002296

**Entity Name:** THE HIDDEN LAKES AT LAKE HAMILTON HOMEOWNER'S ASSOCIATION, INC.

**FILED**  
**Apr 29, 2014**  
**Secretary of State**  
**CC3996692831**

**Current Principal Place of Business:**

2580 CHANNEL WAY  
KISSIMMEE, FL 34746

**Current Mailing Address:**

884 SOUTH DILLARD STREET  
WINTER GARDEN, FL 34787

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

ASMA & ASMA PA  
884 SOUTH DILLARD STREET  
WINTER GARDEN, FL 34787 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 D  
Name AKKERMAN, RUDOLF  
Address 2580 CHANNEL WAY  
City-State-Zip: KISSIMMEE FL 34746

Title D  
Name KOPER-AKKERMAN, MARJON  
Address 2580 CHANNEL WAY  
City-State-Zip: KISSIMMEE FL 34746

Title D  
Name STUT, MARGARET  
Address 2580 CHANNEL WAY  
City-State-Zip: KISSIMMEE FL 34746

*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: RUDOLF AKKERMAN**

**D**

**04/29/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date