

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08590

Entity Name: HIDDEN SPRINGS / ESTATES HOMEOWNERS ASSOCIATION, INC.**FILED**
Mar 04, 2016
Secretary of State
CC1364265780**Current Principal Place of Business:**6037 CEDAR PINE DRIVE
ORLANDO, FL 32819**Current Mailing Address:**PO BOX 1045
WINDERMERE, FL 34786**FEI Number: 59-3035323****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**PELOQUIN, CHARLES
6037 CEDAR PINE DRIVE
ORLANDO, FL 32819 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:** CHARLES PELOQUIN**03/04/2016**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRES	Title	TRES
Name	OLSZEWSKI, JEFF	Name	PELOQUIN, CHARLES
Address	6 BROADWAY COURT	Address	6037 CEDAR PINE DRIVE
City-State-Zip:	ORLANDO FL 32803-5303	City-State-Zip:	ORLANDO FL 32819
Title	VP	Title	S
Name	HAWKINS, FRED	Name	SIMONEL, CHARLES
Address	5441 SPLIT PINE CT	Address	5410 RUSTIC PINE CT
City-State-Zip:	ORLANDO FL 32819	City-State-Zip:	ORLANDO FL 32819

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: CHARLES R PELOQUIN**TREASURER****03/04/2016**

Electronic Signature of Signing Officer/Director Detail

Date