

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20358

**Entity Name:** HIDDEN GOLF CLUB HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

556 RACKET DR., NE  
WINTER HAVEN, FL 33881

**Current Mailing Address:**

556 RACKET DR.  
WINTER HAVEN, FL 33881 US

**FEI Number:** 59-2796446

**Certificate of Status Desired:** No

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

DAMONTE, JONATHAN JAMES  
12110 SEMINOLE BLVD  
7800-113TH N  
LARGO, FL 33778 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 T  
Name GANSON, SUSAN  
Address 862 SANDTRAP CIRCLE  
City-State-Zip: WINTER HAVEN FL 33881

Title P  
Name WALFORD, GEORGE  
Address 831 SANDTRAP CIRCLE  
City-State-Zip: WINTER HAVEN FL 33881

Title S  
Name LAWSON, LOUISE  
Address 695 CENTURY LANE  
City-State-Zip: WINTER HAVEN FL 33881

Title VP  
Name DUERR, SCHERRIE  
Address 685 CENTURY LANE  
City-State-Zip: WINTER HAVEN FL 33881

Title D  
Name BAUM, JERRY  
Address 576 CENTURY DRIVE  
City-State-Zip: WINTER HAVEN FL 33881

Title D  
Name GRUENSTERN, PHIL  
Address 538 CENTURY DRIVE  
City-State-Zip: WINTER HAVEN FL 33881

*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:** LOUISE LAWSON

**SECRETARY**

**03/18/2013**

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

\_\_\_\_\_  
Date