Entity Name: HIDDEN LAKES ESTATES HOMEOWNERS ASSOCIATION OF DEFUNIAK SPRINGS, INC.

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

ATTN: PAUL LAVIOLETTE 436 HIDDEN LAKES TRAIL DEFUNIAK SPRINGS, FL 32433

DOCUMENT# N28379

Current Mailing Address:

HIDDEN LAKES EST. HOMEOWNERS ASSN. P.O. BOX 954 DEFUNIAK SPRINGS, FL 32435 US

FEI Number: 59-2932654

Name and Address of Current Registered Agent:

DAILEY, TANYA M 460 HIDDEN LAKES TRAIL DEFUNIAK SPRINGS, FL 32433 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 | | | | 03/23/2021 |
|---------------------------|---|-----------------|--------------------------|------------|
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Director Detail : | | | | |
| Title | VP | Title | PRESIDENT | |
| Name | BUCHANNON, JAMES L SR. | Name | LAVIOLETTE, PAUL | |
| Address | 313 HIDDEN LAKES TRAIL | Address | 273 HIDDEN LAKES TRAIL | |
| City-State-Zip: | DEFUNIAK SPRINGS FL 32433 | City-State-Zip: | DEFUNIAK SPRINGS FL 3243 | 3 |
| Title | TREASURER | | | |
| Name | DAILEY, TANYA M | | | |
| Address | HIDDEN LAKES EST. HOMEOWNERS ASSN. 460 HIDDEN LAKES TRAIL | | | |
| City-State-Zip: | DEFUNIAK SPRINGS FL 32433 | | | |

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: TANYA DAILEY

TREASURER

03/23/2021

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date