

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2000 8:00 am
Secretary of State

05-24-2000 90038 020 ****61.25

DOCUMENT # 748121

1. Entity Name

HIDDEN ACRES HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

3879 HIDDEN ACRES CIRCLE
 N FT MYERS FL 33903
 US

Mailing Address

PO BOX 4436
 NORTH FORT MYERS FL 33918-4436
 US

2. Principal Place of Business

4/0
 Pepitone Realty Mgmt. Svcs. Corp.
 4210 Metro Parkway, Suite 115
 Fort Myers, FL 33916

Suite, Apt. #, etc.

City & State

Zip

Country

Zip

Country

US

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

~~PARVEY, ALLAN
 3854 HIDDEN ACRES CIRCLE
 NORTH FT MYERS FL 33903~~

7. Name and Address of New Registered Agent

Name **THOMAS F. PERITONE**
 S
 Pepitone Realty Mgmt. Svcs. Corp.
 4210 Metro Parkway, Suite 115
 Fort Myers, FL 33916
 C
 Zip Code

8. The above named entity submits this statement for the purpose of changing its registered o

SIGNATURE

Thomas Pepitone AS MANAGER

(NOTE: Registered Agent's signature is required when reinstating)

4-29-00

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	PARVY,	
STREET ADDRESS	3854 HIDDEN ACRES CIRCLE	
CITY-ST-ZIP	N. FT. MYERS FL 33903	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	WEDLER, BRENT	
STREET ADDRESS	3818 HIDDEN ACRES CIRCLE	
CITY-ST-ZIP	N. FORT MYERS FL 33903	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	CARRASQUILLO, ANN	
STREET ADDRESS	3812 HIDDEN ACRES CIR	
CITY-ST-ZIP	NO FT MYERS FL 33903	
TITLE	T	<input type="checkbox"/> Delete
NAME	ROBBINS, DAVID	
STREET ADDRESS	3879 HIDDEN ACRES CIRCLE	
CITY-ST-ZIP	N. FORT MYERS FL 33903	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	DELANEY, TIM	
STREET ADDRESS	3901 HIDDEN ACRES CIRCLE	
CITY-ST-ZIP	N FT MYERS FL 33903	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PARVEY	
STREET ADDRESS	3871 HIDDEN ACRES CIRCLE	
CITY-ST-ZIP	N. FT. MYERS FL 33903	
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARK STEVENS	
STREET ADDRESS	3807 HIDDEN ACRES CIRCLE	
CITY-ST-ZIP	NFM FL 33903	
TITLE	SECRETARY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BECKY COBURN	
STREET ADDRESS	3914 HIDDEN ACRES CIRCLE	
CITY-ST-ZIP	NFM FL 33903	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

THOMAS PERITONE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-00

Date

941 274-9101

Daytime Phone #

CR2E037 (9/99)