## 2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## May 12, 2003 8:00 am Secretary of State **DOCUMENT # 758035** 1. Entity Name 05-12-2003 90220 022 \*\*\*\*61.25 HIDDEN WATERWAY CLUB, INC. Principal Place of Business Mailing Address 888 N FED HWY 888 N FED HWY LAKE WORTH FL 33462 LAKE WORTH FL 33462 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc.: ☐ CHECK HERE IF MAKING CHANGES 4. FEI Number 59-2783802 Applied For City & State City & State Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HUTCHINS. J. 100 WADERWAY DR S LANTANA FL 83462 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) ed or printed name of registered agent and title if applicable 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. PD Delete Change ☐ Addition TITLE TITLE HUTCHINS, ERNEST J NAME NAME STREET ADDRESS 100 WATERWAY DR S STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LANTANA FL 33462 Change Addition ☐ Delete TITLE TITLE MIDDLEMAN, GORDON NAME NAME --- <del>---</del> --STREET ADDRESS STREET ADDRESS 890 N. FEDERAL HWY CITY-ST-ZIP CITY-ST-ZIP LANTANA FL 33462 **X** Delete ☐ Addition TITLE TITLE ☐ Change JACOBS, CAROL NAME NAME STREET ADDRESS 2200 WATERWAY DR S STREET ADDRESS , CITY-ST-ZIP CITY-ST-ZIP Lantana FL 33462 TITLE Change ☐ Addition ☐ Delete WEDDLETON, RICHARD NAME NAME STREET ADDRESS 300 WATERWAY DR S STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LANTANA FL 33462 ☐ Change Addition ☐ Delete TITLE TITLE CRAIG CATANZARO 200 WATERWAY DR.S. NAME , NAME STREET ADDRESS STREET ADDRESS LANTANA 33462 CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS

**FILED** 

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.

CITY-ST-ZIP

CITY-ST-7IP