

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746812

Entity Name: HIDDEN PINES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O CMC MANAGEMENT
2950 JOG ROAD
GREENACRES, FL 33467

Current Mailing Address:

C/O CMC MANAGEMENT
2950 JOG ROAD
GREENACRES, FL 33467 US

FEI Number: 59-1936160

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WYANT-CORTEZ & CORTEZ
860 US HIGHWAY ONE
SUITE 108
NORTH PALM BEACH, FL 33408 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: LARRY CORTEZ, ESQUIRE

03/28/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title S, VP
Name GILBERTI, MARILYN
Address 1622 SOUTH CLUB DRIVE
City-State-Zip: WELLINGTON FL 33414

Title DIRECTOR, SECRETARY
Name BIRCH, MARLENE
Address 12606 SHADY PINES COURT
City-State-Zip: WELLINGTON FL 33414

Title DIRECTOR
Name GRIMM, JAMES
Address 370 WOOD DALE DRIVE
City-State-Zip: WELLINGTON FL 33414

Title DIRECTOR, PRESIDENT
Name BECK, BRUCE
Address 17230 GULF PINE CIRCLE
City-State-Zip: WELLINGTON FL 33414

Title DIRECTOR
Name TURNER, CHARLES
Address 298 WOOD DALE DRIVE
City-State-Zip: WELLINGTON FL 33414

Title DIRECTOR
Name PUGLIESE, DALE
Address 340 WOOD DALE DRIVE
City-State-Zip: WELLINGTON FL 33414

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: MARILYN GILBERTI

VICE PRESIDENT

03/28/2017

Electronic Signature of Signing Officer/Director Detail

Date