

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748121

Entity Name: HIDDEN ACRES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

HIDDEN ACRES CIRCLE
N. FT. MYERS, FL 33903

FILED
Mar 13, 2019
Secretary of State
8023869810CC

Current Mailing Address:

C/O VESTA PROPERTY SERVICES
PO BOX 1848
FT. MYERS, FL 33902 US

FEI Number: 59-2547011

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VESTA PROPERTY SERVICES
125 SW 3RD PL
STE 207
CAPE CORAL, FL 33991 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: BRANDY DAVENPORT

03/13/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name NICASTRO, ROBERT
Address C/O VESTA PROPERTY SERVICES
PO BOX 1848
City-State-Zip: FT. MYERS FL 33902

Title DIRECTOR
Name CAANGAY, ELIZABETH
Address C/O VESTA PROPERTY SERVICES
PO BOX 1848
City-State-Zip: FT. MYERS FL 33902

Title DIRECTOR
Name WEDLER, BRENT
Address C/O VESTA PROPERTY SERVICES
PO BOX 1848
City-State-Zip: FT. MYERS FL 33902

Title DIRECTOR
Name FOOTE, DEBBIE
Address C/O VESTA PROPERTY SERVICES
PO BOX 1848
City-State-Zip: FT. MYERS FL 33902

Title SECRETARY, TREASURER
Name LAMB, BREE
Address C/O VESTA PROPERTY SERVICES
PO BOX 1848
City-State-Zip: FORT MYERS FL 33902

Title DIRECTOR
Name BUBAR, BOB
Address C/O VESTA PROPERTY SERVICES
PO BOX 1848
City-State-Zip: FORT MYERS FL 33902

Title DIRECTOR
Name GARLICK, BROCK II
Address C/O VESTA PROPERTY SERVICES
PO BOX 1848
City-State-Zip: FORT MYERS FL 33902

Title DIRECTOR
Name WHITEMAN, ROBERT
Address C/O VESTA PROPERTY SERVICES
PO BOX 1848
City-State-Zip: FORT MYERS FL 33902

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: ROBERT NICASTRO

VICE PRESIDENT

03/13/2019

Electronic Signature of Signing Officer/Director Detail

Date