## **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000003743

Entity Name: HIDDEN CREEK AT WEST LAKE PROPERTY

OWNERS'ASSOCIATION, INC.

**Current Principal Place of Business:** 

212 APOLLO BEACH BLVD APOLLO BEACH, FL 33572

**Current Mailing Address:** 

235 APOLLO BEACH BLVD

#417

APOLLO BEACH, FL 33572 US

FEI Number: 26-2511697 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COMMUNITIES FIRST ASSOCIATION MANAGEMENT, LLC 212 APOLLO BEACH BLVD APOLLO BEACH, FL 33572 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: CHRISTINE M TRIMMER 02/22/2023

Electronic Signature of Registered Agent Date

Officer/Director Detail:

City-State-Zip:

Title TREASURER Title PRESIDENT

Name MEZA-PAVON, JESSICA Name CABRAL-DEBES, YEIDY

Address C/O COMMUNITIES FIRST Address C/O COMMUNITIES FIRST

ASSOCIATION MANAGEMENT LLC
235 APOLLO BEACH BLVD #417

ASSOCIATION MANAGEMENT LLC
235 APOLLO BEACH BLVD #417

235 APOLLO BEACH BLVD #417

City-State-Zip: APOLLO BEACH FL 33572 City-State-Zip: APOLLO BEACH FL 33572

Title SECRETARY Title VP

Name JOSEY, VANESSA Name GRITZINGER, LISA

Address C/O COMMUNITIES FIRST Address C/O COMMUNITIES FIRST

ASSOCIATION MANAGEMENT LLC
235 APOLLO BEACH BLVD #417

ASSOCIATION MANAGEMENT LLC
235 APOLLO BEACH BLVD #417

235 APOLLO BEACH BLVD #417

City-State-Zip: RUSKIN FL 33575 City-State-Zip: APOLLO BEACH FL 33572

Title LICENSED COMMUNITY Title DIRECTOR

ASSOCIATION MANAGER Name LIVINGSTON, STEPHEN

Name TRIMMER, CHRISTINE M

Address C/O COMMUNITIES FIRST

Address C/O COMMUNITIES FIRST ASSOCIATION MANAGEMENT LLC

ASSOCIATION MANAGEMENT LLC
235 APOLLO BEACH BLVD #417
235 APOLLO BEACH BLVD #417

APOLLO BEACH FL 33572

City-State-Zip: APOLLO BEACH FL 33572

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: CHRISTINE TRIMMER

LICENSED COMMUNITY 02/22/2023
ASSOCIATION MANAGER

Electronic Signature of Signing Officer/Director Detail

Date

FILED Feb 22, 2023

Secretary of State

5580032040CC