

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000006546

**Entity Name:** HIDDEN LAKE CONDOMINIUM OWNERS' ASSOCIATION, INC.

**FILED**  
**Apr 26, 2024**  
**Secretary of State**  
**2366460934CC**

**Current Principal Place of Business:**

10221 EMERALD COAST PKWY W  
STE 5  
MIRAMAR BCH, FL 32550

**Current Mailing Address:**

10221 EMERALD COAST PKWY W  
STE 5  
MIRAMAR BCH, FL 32550 US

**FEI Number:** 84-2732634

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GELDER, JAY  
10221 EMERALD COAST PKWY W  
STE 5  
MIRAMAR BCH, FL 32550 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:** JAY GELDER

04/26/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MORANO, BARBARA  
Address        10221 EMERALD COAST PARKWAY  
                  WEST  
                  SUITE 5  
City-State-Zip: MIRAMAR BEACH FL 32550

Title            VP  
Name            HITE, BRIAN  
Address        10221 EMERALD COAST PARKWAY  
                  WEST  
                  SUITE 5  
City-State-Zip: MIRAMAR BEACH FL 32550

Title            TREASURER  
Name            ELWART, JOSHUA  
Address        10221 EMERALD COAST PARKWAY  
                  WEST  
                  SUITE 5  
City-State-Zip: MIRAMAR BEACH FL 32550

Title            SECRETARY  
Name            BASTION, LINDSEY  
Address        10221 EMERALD COAST PARKWAY  
                  WEST  
                  SUITE 5  
City-State-Zip: MIRAMAR BEACH FL 32550

Title            DIRECTOR  
Name            KISSLER, JOHN  
Address        10221 EMERALD COAST PARKWAY  
                  WEST  
                  SUITE 5  
City-State-Zip: MIRAMAR BEACH FL 32550

Title            MANAGER  
Name            MONTILLA, MARANDA  
Address        10221 EMERALD COAST PARKWAY  
                  WEST  
                  SUITE 5  
City-State-Zip: MIRAMAR BEACH FL 32550

*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:** BARBARA MORANO

**PRESIDENT**

04/26/2024

Electronic Signature of Signing Officer/Director Detail

Date