

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

DOCUMENT# N97000004234

**Entity Name:** HIDDEN HOLLOW OF PALM BEACH HOMEOWNERS' ASSOCIATION, INC.

**FILED**  
**Apr 24, 2024**  
**Secretary of State**  
**0493331792CC**

**Current Principal Place of Business:**

4227 NORTHLAKE BLVD  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

4227 NORTHLAKE BLVD  
PALM BEACH GARDENS, FL 33410 US

**FEI Number:** 65-0850389

**Certificate of Status Desired:** No

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

FIELDS & BACHOVE, PLLC  
4440 PGA BLVD  
SUITE 308  
PALM BEACH GARDENS, FL 33410 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:** FIELDS BACHOVE

04/24/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           BOSWORTH, RYAN  
Address        4227 NORTHLAKE BLVD  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title           VP  
Name           OSTLUND, HOLLY  
Address        4227 NORTHLAKE BLVD  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title           SECRETARY  
Name           MACIAS, MARIAN  
Address        4227 NORTHLAKE BLVD  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title           PRESIDENT  
Name           PARNELL, STEPHEN  
Address        4227 NORTHLAKE BLVD  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title           DIRECTOR  
Name           FRENCH, SCOTT  
Address        4227 NORTHLAKE BLVD  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title           DIRECTOR  
Name           MARTINS, MARTIN  
Address        4227 NORTHLAKE BLVD  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title           DIRECTOR  
Name           BILT SWITCH, MATT  
Address        4227 NORTHLAKE BLVD  
City-State-Zip: PALM BEACH GARDENS FL 33410

*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:** STEPHEN PARNELL

PRESIDENT

04/24/2024

Electronic Signature of Signing Officer/Director Detail

Date