

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 06, 1999 8:00 am
Secretary of State

03-06-1999 90132 001 ****61.25

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NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 721335					
1. Corporation Name HIDDEN HARBOR CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 1775 N. ANDREWS EXTENSION FORT LAUDERDALE FL 33311-1846			Mailing Address 1775 N. ANDREWS EXTENSION FORT LAUDERDALE FL 33311-1846		



2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29		3. Date Incorporated or Qualified 07/12/1971 4. FEI Number 59-1489169 Applied For Not Applicable	
5. Certificate of Status Desired ☐		8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐	
				\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent JUVE, SHIRLEY 333 NW 17 CT APT 207 POST OFFICE BOX 9057 FT LAUDERDALE FL 33311				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code			
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	NAME	SERACK, JENNIFER C	1.1 TITLE	PRES. HIDDEN HARBOR A	Change	Addition
STREET ADDRESS	1785 N ANDREWS AVE, EXT 207			1.2 NAME	DANIEL J. TOYE		
CITY-ST-ZIP	FORT LAUDERDALE FL 33311	☒ DELETE		1.3 STREET ADDRESS	1785 N. ANDREWS SQ 307		
TITLE	VD	NAME	BAKER, BRUCE	1.4 CITY-ST-ZIP	FT. LAUD FL 33311		
STREET ADDRESS	333 NW 17TH CT, #305	☐ DELETE		2.1 TITLE	PRES. H. HARBOR C	Change	Addition
CITY-ST-ZIP	FT LAUDERDALE FL 33311			2.2 NAME	JAY PEPPER		
TITLE	DTR	NAME	JUVE, SHIRLEY	2.3 STREET ADDRESS	1750 NW 3RD TER 310		
STREET ADDRESS	333 NW 17 CT #207	☐ DELETE		2.4 CITY-ST-ZIP	FT. LAUD, FL 33311		
CITY-ST-ZIP	FT LAUDERDALE FL			3.1 TITLE		Change	Addition
TITLE	SD	NAME	SESSIONS, QUINTON	3.2 NAME			
STREET ADDRESS	1750 NW 3RD TERRACE, #202	☒ DELETE		3.3 STREET ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE FL 33311			3.4 CITY-ST-ZIP			
TITLE	T	NAME	GULL, VIRGINIA	4.1 TITLE		Change	Addition
STREET ADDRESS	1785 N ANDREWS AVE, EXT 103	☒ DELETE		4.2 NAME			
CITY-ST-ZIP	FT LAUDERDALE FL 33311			4.3 STREET ADDRESS			
TITLE		NAME		4.4 CITY-ST-ZIP			
STREET ADDRESS		☐ DELETE		5.1 TITLE		Change	Addition
CITY-ST-ZIP				5.2 NAME			
				5.3 STREET ADDRESS			
				5.4 CITY-ST-ZIP			
				6.1 TITLE		Change	Addition
				6.2 NAME			
				6.3 STREET ADDRESS			
				6.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

DANIEL J. TOYE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-31-99 954-463-3000x421

CR2E037 (1/98)