

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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Feb 02, 2006 8:00 am
Secretary of State

02-02-2006 90045 018 ****61.25

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01032006 Chg-NP CR2E037 (11/05)

DOCUMENT # 721335 1. Entity Name HIDDEN HARBOR CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 2319 N ANDREWS AVENUE FORT LAUDERDALE, FL 33311			Mailing Address C/O RMS ACCOUNTING 2319 N ANDREWS AVENUE FORT LAUDERDALE, FL 33311		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1489169	
				Applied For ☐ Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BECKER & POLIAKOFF, P.A. 3111 STIRLING ROAD FORT LAUDERDALE, FL 33312			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ _____ City _____ Zip Code FL		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LAVROVSKY, STEPHEN 333 NW 17 CT #308 FT LAUDERDALE, FL 33311 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR MICHAEL MERRILL 1775 N. ANDREWS SQUARE # 106W FORT LAUDERDALE, FL 33311 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WALLEY, DAVID 1775 N ANDREWS SQUARE # 202W FORT LAUDERDALE, FL 33311 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR JOSH ROSEN 1785 N. ANDREWS SQUARE # E108 FORT LAUDERDALE, FL 33311 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD O'NEIL, PETER 1752 N.W. 3RD TERRACE, #118 FORT LAUDERDALE, FL 33311 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR BRUCE BARKER 333 NW 17th COURT #305 FORT LAUDERDALE, FL 33311 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR HARRIS FRANKLIN 333 NW 17th COURT # 301 FORT LAUDERDALE, FL 33311 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR JOHN SPEIER 1710 S. OCEAN LANE #206 FORT LAUDERDALE, FL 33316 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR PATRICK PIERSON 1752 NW 3rd TERRACE #316 FORT LAUDERDALE, FL 33311 ☐ Change ☒ Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>David M. Walley</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 1-24-06		Daytime Phone # 303-596-5052	