

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 724467 (6)
1. Corporation Name
HIDDEN HARBOUR ONE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**5710 HARBOUR CLUB DR
FT. MYERS FL 33919**

Mailing Address
**5710 HARBOUR CLUB DR
FT. MYERS FL 33919**

3. Date Incorporated or Qualified
10/02/1972

3a. Date of Last Report
03/22/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
59-1658002

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

City & State

City & State

23

28

6. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

Zip

Country

Zip

Country

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**USILTON, ELEANOR
5666 CUTTER LANE
5710 HARBOUR CLUB RD
FT MYERS FL 33919**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE **TO** ☒ DELETE

NAME **LIGGETT, VIRGIL**
STREET ADDRESS **4824 ANCHORAGE**
CITY-ST-ZIP **FT MYERS, FL 00000 33919**

TITLE **VD** ☐ DELETE

NAME **ROYAL, DONA**
STREET ADDRESS **5762 BASS CIRCLE**
CITY-ST-ZIP **FT MYERS, FL 00000 33919**

TITLE **DS** ☐ DELETE

NAME **USILTON, ELEANOR**
STREET ADDRESS **5666 CUTTER LANE**
CITY-ST-ZIP **FT MYERS, FL 00000 33919**

TITLE **D** ☐ DELETE

NAME **NEWMAN, PATRICIA**
STREET ADDRESS **4765 HIDDEN HARBOUR BLVD.**
CITY-ST-ZIP **FT. MYERS FL 33919**

TITLE **VD** ☒ DELETE

NAME **GLUCK, LAWRENCE**
STREET ADDRESS **5760 BASS CIRC**
CITY-ST-ZIP **FT MYERS, FL-00000 33919**

TITLE **PD** ☐ DELETE

NAME **KLAUER, WILLIAM**
STREET ADDRESS **5742 BASS CIRCLE**
CITY-ST-ZIP **FT MYERS FL 33919**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **TO** ☒ Change ☐ Addition

1.2 NAME **WEISS, LORINE**
1.3 STREET ADDRESS **4811 Anchorage AVE**
1.4 CITY-ST-ZIP **Fort Myers, FL 33919**

2.1 TITLE **MARIE DEMILIO** ☐ Change ☒ Addition

2.2 NAME **5750 BASS CIRCLE**
2.3 STREET ADDRESS **FORT MYERS, FL 33919**

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE **VD** ☒ Change ☐ Addition

5.2 NAME **CHARLES Huddleson**
5.3 STREET ADDRESS **5685 Harbour Club Rd**
5.4 CITY-ST-ZIP **Fort Myers, FL 33919**

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Eleanor Usilton **ELEANOR USILTON** 4/9/96 481-8613

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)