

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2002 8:00 am
Secretary of State

02-21-2002 90099 005 ****61.25

- 18780



DO NOT WRITE IN THIS SPACE

DOCUMENT # 746812

1. Entity Name

HIDDEN PINES HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

12785 C FOREST HILL BLVD
 WELLINGTON FL 33414
 US

Mailing Address

12785 C FOREST HILL BLVD
 WELLINGTON FL 33414
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1936160

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NEWSOME, JOHN
12785 W FOREST HILL BLVD
WELLINGTON FL 33414

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
 NAME **CHESNEY, AUDREY H**
 STREET ADDRESS **281 WOOD DALE DR**
 CITY-ST-ZIP **WELLINGTON FL 33414-4718**

TITLE **T** ☐ Delete
 NAME **STEINER, MURRY**
 STREET ADDRESS **12765 W. FOREST HILL BLVD. #1302**
 CITY-ST-ZIP **WELLINGTON FL 33414**

TITLE **D** ☐ Delete
 NAME **BALDWIN, ARLENE**
 STREET ADDRESS **287 WOOD DALE DRIVE**
 CITY-ST-ZIP **WEST PALM BEACH FL 33414**

TITLE **VP** ☐ Delete
 NAME **SPAHL, PETER**
 STREET ADDRESS **12765 W FOREST HILL BLVD #1302**
 CITY-ST-ZIP **WELLINGTON FL 33414**

TITLE **P** ☐ Delete
 NAME **WALTOR, JOAN**
 STREET ADDRESS **12765 W. FOREST HILL BLVD. #1302**
 CITY-ST-ZIP **WELLINGTON FL 33414**

TITLE **S** ☐ Delete
 NAME **KEATING, EDWARD**
 STREET ADDRESS **12765 W FOREST HILL BLVD #1302**
 CITY-ST-ZIP **WELLINGTON FL 33414**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

12. 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 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:

JOAN R. WALTOR
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2037 (9/01)