

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 17, 2006 8:00 am
Secretary of State

02-17-2006 90080 050 ****61.25

DOCUMENT # 747213

1. Entity Name

HIDDEN BAY VILLAS ASSOCIATION, INC.



Principal Place of Business

7300 SUNSHINE SKYWAY LANE
ST PETE FL 33711
US

Mailing Address

15910 EAGLE RIVER WAY
TAMPA FL 33624
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2124427

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SMITH, THOMAS EA
15910 EAGLE RIVER WAY
TAMPA FL 33624

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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

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

TITLE DD ☐ Delete
NAME HARRIS, RUSSELL A JR
STREET ADDRESS 7300 SUNSHINE SKYWAY LIN S #107
CITY-ST-ZIP SAINT PETERSBURG FL 33711

TITLE PD ☒ Delete
NAME BUFFINGTON, LARRY
STREET ADDRESS 7300 SUNSHINE SKYWAY LN S #206
CITY-ST-ZIP SAINT PETERSBURG FL 33711

TITLE DD ☒ Delete
NAME SHEPARD, ROBERT
STREET ADDRESS 7310 SUNSHINE SKYWAY LN S #215
CITY-ST-ZIP SAINT PETERSBURG FL 33711

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE AD ☐ Change ☒ Addition
NAME DONALD SHARPE
STREET ADDRESS 7300 SUNSHINE SKYWAY LANE S. # 216
CITY-ST-ZIP ST. PETERSBURG, FL 33711

TITLE D ☐ Change ☐ Addition
NAME VALERIE BOWDEN
STREET ADDRESS 7300 SUNSHINE SKYWAY LANE S. # 120
CITY-ST-ZIP ST. PETERSBURG, FL 33711

TITLE SD ☐ Change ☐ Addition
NAME REBECCA ROCKS
STREET ADDRESS 7300 SUNSHINE SKYWAY LANE S. # 117
CITY-ST-ZIP ST. PETERSBURG, FL 33711

TITLE VD ☐ Change ☐ Addition
NAME HOWARD KORNACK
STREET ADDRESS 7300 SUNSHINE SKYWAY LANE S. # 101
CITY-ST-ZIP ST. PETERSBURG, FL 33711

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *AR Harris Jr.* AR HARRIS JR.

2/6/06

(727)2516844