## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name 756589

(8)

HIDDEN WATERS CIVIC ASSOCIATION, INC.

Principal Place of Business	

Mailing Address



	S NEST DRIVE /E SPRINGS FL 32043	2786 QUAILS NEST DE GREEN COVE SPRINGS		3					
,					3. Date incorporated or Qualification 03/03/1981	ied <b>3a.</b> [	Date of Las 04/06/		
2. Principal Place of Business 2a. Mailing A			g Address		4. FEI Number			Applied For	
Suite, Apt.	Suite, Apt. #, etc.	ito Apt # etc		59-2295460			Not Applicable		
22		27	27			· 🗆		5 Additional Required	
City & Stat	e	City & State			Election Campaign Financir     Trust Fund Contribution	g 🗆	\$5.0 Add	00 May Be ed to Fees	
Zip 24	Country 25	Zip <b>29</b>	30 Cot	intry	This corporation has liability     Florida Statutes	for intangible	tax under s		
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
MCCLELLAN, RUTH M.  2202 HIDDEN WATERS DR E.  GREEN COVE SPRINGS FL 32043  81 Name CARVER GENE 82 Street Address (P.O. Box Number is Not Acceptable) 2750 HIDDEN WATERS DR N  83  GREEN COVE SPRINGS FL 32043  84 City  FI 85 Zip Code									
SIGNATURE	to the provisions of Sections 617.0502 a red agent, or both, in the State of Florida ith, and accept the obligations of, Section Signature, typed or printed name of registered agent ar	d title if applicable (NOT				purpose of chappointment a	anging its s registered		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO	OFFICERS AN	DIRECTO	DRS IN 12	
TITLE	VD	DELETE		TLE	VD		X Change	ORS IN 12  Addition	
NAME STREET ADDRESS	SLOCUM, BETTY			AME	WENDORF IVAN			1	
CITY-ST-ZIP	2239 HIDDEN WATER DR W GREEN COVE SPRGS FL	/		REET ADDRESS	2240 HIDDEN WATERS	DR W		از	
TITLE	SO			TY - ST - ZIP	GREEN COVE SPRINGS	FL	<b>(=)</b> (-)		
NAME	PEACOCK, SARA	( DOCCE IE	21 TI 22 N/		SD		Change	Addition	
STREET ADDRESS	2736 QUAILS NEST DR			REFT ADDRESS	MCCLELLAN RUTH				
CITY-ST-ZIP	GREEN COVE SPRGS FL		1	ITY-ST-ZIP	2202 HIDDEN WATERS	: -			
TITLE	SD	DELETE	3.1 Tt		GREEN COVE SPRINGS	F1.	Change	Addition	
NAME	Caille, Helen		3 2 NA	ME			_ "		
STREET ADDRESS	2744 WOODPECKER RD	,	3 3 ST	REET ADDRESS	SAME				
CITY-ST-ZIP	GREEN COVE SPRGS FL		3 4. C	ITY-ST-ZIP					
TITLE	CD	DELETE	4 1 JII	TLE	ŠD		Change	Addition	
NAME	DICKSON, WALLACE		4. 2 N		LEMAY THOMAS				
STREET ADDRESS	2190 HIDDEN WATERS DR. E		4	REET ADORESS	2226 HIDDEN WATERS				
CITY-ST-ZIP TITLE	GREEN COVE SPRGS FL SD	DELETE		TY-ST-ZIP	GREEN COVE SPRINGS				
NAME	HURT, BUFORD W	-Intrese	517()	ì			Change	Addition	
STREET ADDRESS	2254 HIDDEN WATERS DR W.		5 2 NA		CAME				
CITY-ST-ZIP	GREEN COVE SPRGS FL			REET ADDRESS	SAME				
TITLE	D D	DELETE	5 4 CF	IY-ST-ZIP	CD.		X) Change	Addition	
NAME	POPOUR, MARIE	Poccere	62 NA		SD BLACHE AL		الم. Gnange	☐ Addition	
STREET ADDRESS	2191 HIDDEN WATERS DR E.			REET ADDRESS	2774 QUAILS NEST DR				
CITY-ST-ZIP	GREEN COVE SPRINGS FL			Y-ST-ZIP	GREEN COVE SPRINGS I	77			
	cortify that the information supplied with	h ship sitter in the last of the	■ 54 UII	1-31-21	PUEFU COAS SEVINGS I	1.4			

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.

(904) 291-1941 Daytime Phone #