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Apr 20 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Northam</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **759353** (6)

1. Corporation Name

**HIDDEN LAKE HOMEOWNERS ASSOCIATION OF PINELLAS, INC.**

Principal Place of Business

Mailing Address

~~1212 COURT ST. SUITE B~~  
**CLEARWATER FL 34616**

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**CLEARWATER FL 34616**



3. Date Incorporated or Qualified

**07/28/1981**

4. FEI Number

**59-2317533**

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 **1299 Main ST**

26 **1299 Main ST.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **Suite F**

27 **Suite F**

City & State

City & State

23 **Dunedin FL**

28 **Dunedin 34698**

Zip

Country

Zip

Country

24 **34698**

25 **USA**

29 **FL**

30 **USA**

5. Certificate of Status Desired ☐

**\$8.75** Additional

Fee Required

6. Election Campaign Financing

**\$5.00** May Be

Trust Fund Contribution ☐

Added to Fees

7. Is this nonprofit corporation a homeowners association?

☒ Yes ☐ No

8. This corporation owes or has paid the current year intangible

Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MEZER, STEVEN H. PA**  
**1212 COURT STREET, STE B**  
**CLEARWATER FL 34616**

81 Name

**Robert L Tanel P.A**

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

**1299 Main ST. Suite F**

83

84 City **Dunedin**

**FL**

85 Zip Code **34698**

11. Pursuant to the provisions of Sections 617.0502 and 617.0508, 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 the date of signature

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☒ DELETE

NAME **P O'SHEA, DENNIS**  
STREET ADDRESS **2760 WINDING WAY**  
CITY - ST - ZIP **PALM HARBOR FL**

TITLE ☐ DELETE

NAME **GASSEL, ROBERT**  
STREET ADDRESS **1970 HIDDEN LAKE DR**  
CITY - ST - ZIP **PALM HARBOR FL**

TITLE ☒ DELETE

NAME **ARMSTRONG, THOMAS**  
STREET ADDRESS **1163 RIDGECREST CT.**  
CITY - ST - ZIP **PALM HARBOR FL**

TITLE ☒ DELETE

NAME **PETLEV, LEONARD**  
STREET ADDRESS **1123 NORTHBRIDGE DR**  
CITY - ST - ZIP **PALM HARBOR FL**

TITLE ☐ DELETE

NAME **PERRY, ROBERT**  
STREET ADDRESS **2580 ROLLING OAKS DR**  
CITY - ST - ZIP **PALM HARBOR FL**

TITLE ☒ DELETE

NAME **TOMISMAN, MILORID**  
STREET ADDRESS **1974 HIDDEN LAKE DR**  
CITY - ST - ZIP **PALM HARBOR FL**

TITLE ☐ DELETE

NAME **PETLEV, LEONARD**  
STREET ADDRESS **1123 NORTHBRIDGE DR**  
CITY - ST - ZIP **PALM HARBOR FL**

14. 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 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: **LEONARD PETLEV** 11/8/98 813-767-6054

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0002604

CR2E037 (10/97)