

N1500003643

Division of Corporations
Florida Department of State
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To: Division of Corporations
Fax Number : (850)617-6380

From: Account Name : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.
Account Number : I19990000006
Phone : (407)425-7010
Fax Number : (407)425-2747

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: corporate@zkslaw.com

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**COR AMND/RESTATE/CORRECT OR O/D RESIGN
HIDDEN-HARBOR WATERFRONT CONDOMINIUM ASSOCIATION,
IN**

Certificate of Status	0
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Corporate Filing Menu

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: HIDDEN-HARBOR WATERFRONT CONDOMINIUM ASSOCIATION, INC.

DOCUMENT NUMBER: N15000003643

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

D. SCOTT BAKER, ESQUIRE

(Name of Contact Person)

ZIMMERMAN, KISER & SUTCLIFFE, P.A.

(Firm/ Company)

315 E. ROBINSON STREET, SUITE 600

(Address)

ORLANDO, FLORIDA 32801

(City/ State and Zip Code)

CORPORATE@ZKSLAWFIRM.COM

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call.

Jessica Snyder, Corporate Paralegal

407

425-7010

at

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State.

- \$35 Filing Fee
- \$43.75 Filing Fee & Certificate of Status
- \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
- \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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Articles of Amendment
to
Articles of Incorporation
of

HIDDEN-HARBOR WATERFRONT CONDOMINIUM ASSOCIATION, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N15009003643

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

135 W CENTRAL BLVD, STE 730

ORLANDO, FLORIDA 32801

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

135 W CENTRAL BLVD, STE 730

ORLANDO, FLORIDA 32801

B. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: ANDREW L. REIFF, P.A.

135 W CENTRAL BLVD, STE 730

(Florida street address)

New Registered Office Address:

ORLANDO

(City)

Florida 32801

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change. Mike Jones leaves the corporation. Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add

Example.

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>P</u>	<u>LEAVER, III, CLYDE C</u>	<u>3893 ROUTE 202</u> <u>DOYLESTOWN, PA 18902</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>S/T</u>	<u>TRIGLIA, ANTHONY M</u>	<u>12651 20TH STREET E</u> <u>PARRISH, FL 34219</u>
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>D</u>	<u>CAMPBELL, ROBERT E.</u>	<u>236 WELLS ROAD</u> <u>DOYLESTOWN, PA 18901</u>
<input checked="" type="checkbox"/> Remove			
4) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>D</u>	<u>HIRSCHOFF, JEFFRY J.</u>	<u>219 SCOTT ROAD</u> <u>PERKASIE, PA 18944</u>
<input checked="" type="checkbox"/> Remove			
5) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>D</u>	<u>RUPPRECHT, JOHN C</u>	<u>111 EAGLE RISE, UNIT 22</u> <u>MANCHESTER CENTER, VT</u>
<input checked="" type="checkbox"/> Remove			<u>05255</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add	<u>D/P/S/T</u>	<u>STEWART, WILLIAM</u>	<u>135 W CENTRAL BLVD Ste 730</u> <u>ORLANDO, FLORIDA 32801</u>
<input type="checkbox"/> Remove			

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**See additional Directors on next Page.

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

ARTICLE X, BOARD, PARAGRAPH K, is hereby revoked in its entirety and is amended to read as follows:

K. At each Annual Member's Meeting held subsequent to the year in which the Majority Election Meeting occurs, the number of Directors to be elected shall be three (3) Directors.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example.

<input type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>STEWART, MARY M</u>	<u>135 W CENTRAL BLVD Ste 730</u> <u>ORLANDO, FLORIDA 32801</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>STEWART, MARY B</u>	<u>135 W CENTRAL BLVD Ste 730</u> <u>ORLANDO, FLORIDA 32801</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____

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F. If amending or adding additional Articles, enter change(s) here.
(attach additional sheets, if necessary). (Be specific)

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The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: UPON FILING
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) **(CHECK ONE)**

- The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

- There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 08/08/2024

Signature *William Stewart*

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

William Stewart
(Typed or printed name of person signing)

Director
(Title of person signing)

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