


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 18, 2007 8:00 am
Secretary of State

04-18-2007 90170 012 ****61.25

DOCUMENT # N31570			
1. Entity Name HIDDEN HARBOUR HOMEOWNER'S ASSOCIATION, INC.			
Principal Place of Business C/O INFINITI PROPERTY MANAGEMENT, INC 1301 SEMINOLE BLVD, #110 LARGO FL 33770 US		Mailing Address C/O INFINITI PROPERTY 1301 SEMINOLE BLVD #110 LARGO FL 33770 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent INFINITI PROPERTY MANAGEMENT 1301 SEMINOLE BLVD STE 110 LARGO FL 33770		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning.)</small> DATE _____			
FILE NOW: FEE IS \$61.25 Due By May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY ST ZIP	D KEEGAN, CAROL 701 HIDDEN HBR DR INDIAN ROCKS BEACH FL 33785 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	SD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition X
TITLE NAME STREET ADDRESS CITY ST ZIP	SD <input checked="" type="checkbox"/> Delete VALENTINO, RUDOLPH 604 HIDDEN HARBOUR DR INDIAN ROCKS BCH FL	TITLE NAME STREET ADDRESS CITY ST ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Randy Fortner 703 Hidden Harbour Dr. Indian Rocks Beach, FL 33785
TITLE NAME STREET ADDRESS CITY ST ZIP	TD <input type="checkbox"/> Delete HUNT, PHYLLIS 612 HIDDEN HARBOUR DR INDIAN ROCKS BEACH FL 33785	TITLE NAME STREET ADDRESS CITY ST ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Kraig Erickson 511 Hidden Harbour Dr. Indian Rocks Beach, FL 33785
TITLE NAME STREET ADDRESS CITY ST ZIP	VD <input type="checkbox"/> Delete KLINE, DAVID 905 HIDDEN HARBOUR DR INDIAN ROCKS BEACH FL 33785	TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	PD <input type="checkbox"/> Delete HOWELL, ED 612 HIDDEN HARBOUR DR INDIAN ROCKS BEACH FL 33785	TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	D <input type="checkbox"/> Delete LITZMAN, JUNE 709 HIDDEN HARBOUR DR INDIAN ROCKS BEACH FL 33785	TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition



1st MOORE CR2E037 (10/06)

4. FEI Number **59-2991184** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

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: *Edward T. Howell, President, Hidden Harbour Homeowners' Assn. (727) 593-9250*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date **4/18/07** Daytime Phone #