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 # N33971

(5)

HIDDEN HOLLOW HOMEOWNERS ASSOCIATION, INC.

חוטטבא	HOLLOW HOWIEDWILLIO	AUGODIA II ONI II II O	•		
Principal Place of	of Business	Mailing Address			felle Anfill Artit mehrt didte Arter gelit.
531 HIDDEN HOLLOW DRIVE MERRITT ISLAND FL 32952-1064		531 HIDDEN HOLLOW DRIVE MERRITT ISLAND FL 32952-1064			
US		US		3. Date incorporated or Qualified 08/28/1989	3a. Date of Last Report 03/03/1995
2. Principal Plac	ce of Business	2a. Mailing Address		4. FEI Number 59-3008987	Applied For Not Applicable
11		26 Cuita Ant # oto			\$8.75 Additional
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
13		28		Trust Fund Contribution	- Added to rees
Zıp	Country	Ζιρ	Country 30	This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032,
24	9. Name and Address of Current	Registered Agent	30	10. Name and Address of New R	
	U. Hallis and I		81 Name (iail Stalnaker	
CECEDT	N N 66		Street A	cklress (P.O. Box Number is Not Acceptab	le)
SEGERT	, JULEE DEN HOLLOW DRIVE		573	Hidden Hollow D	<u>C</u>
	I ISLAND FL 32952		83	•	
MCMAII	ISEMID I E GEOGE		84 Çity		FL 85 Zip Code 3
			Uec	ritt Island	FL 👸 32952
11. Pursuant t	o the provisions of Sections 617.0502	and 617.1508. Florida Statu	ites, the above named co	rporation submits this statement for the pur board of directors. Thereby accept the app	pose of changing its registered only pintment as registered agent. I am
or registere familiar wit	ed agent, or both, in the State of Florid h, and accept the obligations of, Secti	on 617.0503, Florida Stato	25 -0 C/ 0	1- (0 21 91.
SIGNATURE	Gail Stalnaker		KUTA OLOMIC	Cor	3-26.96
	Signature, typed or printed name of registered agent.		TE Registered Agent signature re 13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
12.	OFFICERS AND	DIRECTORS	1 t Tife	20	Change Addition
TITLE	PD PECEDT NUEE	<u></u>	1.2 NAME	ours Pazorla	
NAME STREET ADDRESS	SEGERT, JULEE 531 HIDDEN HOLLOW DRIVE		1.3 STEET ADDRESS	203 Hidden Hollow M	-
CITY-ST-ZIP	MERRITT ISLAND FL		1.4 CIT (- ST - ZIP	Herrit Island, 71	33923
TITLE	VD	□ OĒLETE	2 1 TıT .E	NO	Change Addition
NAME	CAMPBELL, W. D		2.2 NAME	John Horan 571 Hidden Hollow Dr	-
STREET ADDRESS	599 HIDDEN HOLLOW DRIVE		2 3 STREET ADDRESS		
CITY-ST-ZIP	MERRITT ISLAND FL		2 4 Ct Y - ST - ZtP	Herrit Island, 71	32952 Addit on
TITLE	TD	DELETE	3.1 Tufl.E		
NAME	STALNAKER, GAIL	•	3.2 NAME 3.3 ST≓EET ACORESS		
STREET ADDRESS	572 HIDDEN HOLLOW DRIVE	:	3.4 CITY - ST-ZIP		_
CITY - ST - ZIP	MERRITT ISLAND FL	DELETE	4.1 TITLE	30	Change Addition
TITLE NAME	SD Latimer, Debbie	hand	4. 2 NAMÉ	-us intimer	
STREET ADDRESS	598 HIDDEN HOLLOW DR		4 3 STHEET ADDRESS	598 Hidden Hohow Dr	050
CITY-ST-ZIP	MERRITT ISLAND FL		4.4 CI Y-ST-ZIP	Herrit Iskind. 71	32623
TITLE	SD	DELETE	51TF_E	50	Change Addition
NAME	CLARK, LARRY		5 2 NA ME	W.D. CAHPBELL 599 Hidden Hollow D.	۳
STREET ADDRESS	588 HIDDEN HOLLOW DRIVI		53 STREET ADDRESS	Sild Hoven House	39952
CITY-ST-ZIP	MERRITT ISLAND FL	Filherere	5 4 C) 'Y - ST - ZIP	Herrit Iskud, 71	Change Addition
TITLE		☐ DELETÉ	6171 LE 62 NVME		
NAME			63 STREET ADDRESS		
STREET ADDRESS			6.4.CL 'V. ST. 7IP		
CITY-ST-ZIP	by cortify that the information supplied	with this filing is voluntarily t		Lialify for the exemption stated in Section 119 occurate and that my signature shall have the	9.07(3)(k), Florida Statutes. 1 further
certify that	at the information indicated on this ann	iual report or supplemental a	annual report is true and a	courate and that my signature shall have the te this report as required by Chapter 617, f	e same legal effect as it made under Florida Statutes; and that my name
oath; tha appears	t I am an officer or director of the corp in Block 12 or Block 13 if changed, or	on an attachment with an a	ddress.	,	
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SIGNATURE:

3-26-96 (161) 452-1392

CR2E037 (12/95)