## **2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 747213** 

Entity Name: HIDDEN BAY VILLAS ASSOCIATION, INC.

FILED Sep 17, 2021 Secretary of State 8868546731CC

## **Current Principal Place of Business:**

C/O SPS

PO BOX 47351 ST. PETERSBURG ST PETERSBURG, FL 33743

## **Current Mailing Address:**

SPS

P.O. BOX 47351

ST. PETERSBURG, FL 33743 US

FEI Number: 59-2124427 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SPS, LLC C/O SPS P.O. BOX 47351

ST. PETERSBURG, FL 33743 US

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.

SIGNATURE: SPS 09/17/2021

Electronic Signature of Registered Agent Date

Officer/Director Detail:

 Title
 TREASURER
 Title
 SECRETARY

 Name
 KENNEDY, WILLIAM
 Name
 GOULD, DONNA

Address SPS Address C/O SPS

P.O. BOX 47351 P.O. BOX 47351

City-State-Zip: ST. PETERSBURG FL 33743 City-State-Zip: ST. PETERSBURG FL 33743

TitleVPTitleMANAGERNameMONNETT, JOHNNameLLC, SPS

Address SPS Address SPS

P.O. BOX 47351 P.O. BOX 47351

City-State-Zip: ST. PETERSBURG FL 33743 City-State-Zip: ST. PETERSBURG FL 33743

Title PRESIDENT

Name NICHOLSON, RONNIE

Address SPS

P.O. BOX 47351

City-State-Zip: ST. PETERSBURG FL 33743

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: SPS LLC MANAGER 09/17/2021