### 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008027

Entity Name: HIDDEN LINKS CONDOMINIUM ASSOCIATION, INC.

FILED Apr 22, 2017 Secretary of State CC7337845031

# **Current Principal Place of Business:**

C/O CORNERSTONE ASSOCIATION MANAGEMENT INC 11934 FAIRWAY LAKES DR. SUITE 1 FORT MYERS, FL 33913

## **Current Mailing Address:**

C/O CORNERSTONE ASSOCIATION MANAGEMENT INC 11934 FAIRWAY LAKES DR. SUITE 1 FORT MYERS, FL 33913 US

FEI Number: 04-3637604 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

SHERRY, NASSOIY CORNERSTONE ASSOCIATION MANAGEMENT, INC. 11934 FAIRWAY LAKES DR. SUITE 01 FORT MYERS, FL 33913 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:

**Electronic Signature of Registered Agent** 

Date

#### Officer/Director Detail:

Title VP Title PRESIDENT

Name BARTIK, ARLENE Name MAXWELL, KAREN

Address 12021 BRASSIE BEND UNIT 101 Address 12037 BRASSIE BEND #201
City-State-Zip: FORT MYERS FL 33913 City-State-Zip: FORT MYERS FL 33913

Title SECRETARY, TREASURER

Name SUTHERLAND, ROBERT

Address 12021 BRASSIE CIRCLE #201

City-State-Zip: FORT MYERS FL 33913

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: KAREN MAXWELL

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

04/22/2017