

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000004340

**FILED  
Feb 27, 2015  
Secretary of State  
CC6388111278**

**Entity Name:** HIDDEN HAMMOCK COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

979 BEACHLAND BLVD.  
VERO BEACH, FL 32963

**Current Mailing Address:**

979 BEACHLAND BLVD.  
VERO BEACH, FL 32963

**FEI Number: 51-0598083**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MARINE, CHRISTOPHER H  
979 BEACHLAND BLVD.  
VERO BEACH, FL 32963 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 DP  
Name NELSON, HOWARD  
Address 200 GRAVES ROAD  
City-State-Zip: FORT PIERCE FL 32945

Title DVP  
Name CARTER, DAVID M  
Address 1575 GRACEWOOD LANE  
City-State-Zip: VERO BEACH FL 32963

Title DT  
Name SMITH, SUSAN S  
Address 6000 NORTH A1A  
City-State-Zip: VERO BEACH FL 32963

*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: SUSAN S, SMITH**

**TREASURER**

**02/27/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date