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Apr 15 1997 8:00am
Secretary of State



NONPROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N31369 (4)
1. Corporation Name
HILLCREST COUNTRY CLUB NO. 8 CONDOMINIUM, INC.



Principal Place of Business Mailing Address
1101 S HILLCREST CT 1101 S HILLCREST CT
HOLLYWOOD FL 33021 HOLLYWOOD FL 33021-7888

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		03/24/1989	03/13/1996
22 City & State		27 City & State		4. FEI Number	Applied For
23 Zip		28 Zip		65-0111622	Not Applicable
24 Country		29 Country		5. Certificate of Status Desired	\$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent
SUBIN, IRA H
1101 S HILLCREST CT
HOLLYWOOD 33021

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

12. OFFICERS AND DIRECTORS		
TITLE	PD	<input type="checkbox"/> DELETE
NAME	SUBIN, IRA	
STREET ADDRESS	1101 S. HILLCREST CT.	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	V P	<input type="checkbox"/> DELETE
NAME	HUDLER, LYNN	
STREET ADDRESS	1101 S. HILLCREST CT.	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	HUDLER, LYNN	
STREET ADDRESS	1101 S. HILLCREST CT.	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SKILLING, BARNEY	
STREET ADDRESS	1101 S. HILLCREST CT.	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	RESNICK, SUSAN	
STREET ADDRESS	1101 S. HILLCREST CT.	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	TD LYNN HUDLER	
1.3 STREET ADDRESS	1101 S HILLCREST CT	
1.4 CITY-ST-ZIP	HOLLYWOOD FL	
2.1 TITLE	SD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	JUNE WHITE	
2.3 STREET ADDRESS	1101 S HILLCREST CT HOLLYWOOD FL	
2.4 CITY-ST-ZIP		
3.1 TITLE	TD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	DAVID KORN	
3.3 STREET ADDRESS	1101 S HILLCREST CT	
3.4 CITY-ST-ZIP	HOLLYWOOD FL	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	P IDA JEAN MILLER	
4.3 STREET ADDRESS	1101 S HILLCREST CT HOLLYWOOD	
4.4 CITY-ST-ZIP	FL 33021	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 or changed or on an attachment with an address.

SIGNATURE _____ DATE _____

CR2E037 (9/96)