

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 26, 2000 8:00 am
Secretary of State

05-26-2000 90093 040 ****61.25

DOCUMENT # N31369

1. Entity Name

HILLCREST COUNTRY CLUB NO. 8 CONDOMINIUM, INC.

Principal Place of Business

Mailing Address

1101 S HILLCREST CT
 HOLLYWOOD FL 33021

1101 S HILLCREST CT
 #303
 HOLLYWOOD FL 33021-7836

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0111622

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HUDLER, MR. LYNN W
 1101 S HILLCREST CT
 HOLLYWOOD 33021

Name **SEVERANCE, MR. JOHN**

Street Address (P.O. Box Number is Not Acceptable)

1101 SO. HILLCREST COURT #306

City **HOLLYWOOD**

FL

Zip Code **33021**

8. 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

John D. Severance, President

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

May 4, 2000

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D <input type="checkbox"/> Delete
NAME	SUBIN, IRA
STREET ADDRESS	1101 S. HILLCREST CT.
CITY-ST-ZIP	HOLLYWOOD FL 33021
TITLE	TDPO <input checked="" type="checkbox"/> Delete
NAME	HUDLER, MR. LYNN W
STREET ADDRESS	1101 S. HILLCREST CT.
CITY-ST-ZIP	HOLLYWOOD FL 33021
TITLE	V <input type="checkbox"/> Delete
NAME	SEVERANCE, JOHN
STREET ADDRESS	1011 S. HILLCREST CT.
CITY-ST-ZIP	HOLLYWOOD FL 33021
TITLE	V <input checked="" type="checkbox"/> Delete
NAME	SHILLING, BARNEY
STREET ADDRESS	1101 S. HILLCREST CT.
CITY-ST-ZIP	HOLLYWOOD FL 33021
TITLE	SD <input type="checkbox"/> Delete
NAME	WHITE, JUNE
STREET ADDRESS	1001 S. HILLCREST CT.
CITY-ST-ZIP	HOLLYWOOD FL 33021
TITLE	D <input type="checkbox"/> Delete
NAME	BECKERMAN, WENDY
STREET ADDRESS	1101 S. HILLCREST CT.
CITY-ST-ZIP	HOLLYWOOD FL 33021

TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BRUNEAU, JEAN-MARIE
STREET ADDRESS	1101 SO. HILLCREST CT.
CITY-ST-ZIP	HOLLYWOOD, FL. 33021
TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MASSEY-ROLAND
STREET ADDRESS	1101 SO HILLCREST CT.
CITY-ST-ZIP	HOLLYWOOD, FL. 33021
TITLE	V <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SEVERANCE, JOHN
STREET ADDRESS	1101 SO. HILLCREST CT.
CITY-ST-ZIP	HOLLYWOOD, FL 33021
TITLE	SD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FLAX, FAITH
STREET ADDRESS	1101 SO. HILLCREST CT.
CITY-ST-ZIP	HOLLYWOOD, FLA. 33021
TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ADA BARBOZA
STREET ADDRESS	1101 SO. HILLCREST CT
CITY-ST-ZIP	HOLLYWOOD, FLA. 33021
TITLE	TD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BECKERMAN, WENDY
STREET ADDRESS	1101 SO. HILLCREST CT.
CITY-ST-ZIP	HOLLYWOOD, FLA. 33021

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

John D. Severance, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CRF 037 (9/99)