2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N31369 1. Entity Name					Secretary of State			
HILLCRI	EST COUNTRY CLUB NO. 8 (CONDOMINIUM, INC.		(h)		-17-2001 90008 C		
Principal Place of Business Mailing Address								
1101 S HILLCREST CT HOLLYWOOD FL 33021		1101 S HILLCREST CT #303 HOLLYWOOD FL 33021			A0077897			
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State		City & State			4. FEI Number	55-0111622		plied For t Applicable
Zip	Country	Zip	Country	- : -	5. Certificate of Sta	atus Desired 🕯 🔲	\$8.75 Add Fee Required	itional
	6. Name and Address of Current R	egistered Agent			7. Name and Add	ress of New Register		
				Name				
SEVERANCE, JOHN			Street A	t Address (P.O. Box Number is Not Acceptable)				
110,1:S HILLCREST CT HOLLYWOOD FL 33021								_
-¥€(500 12 00021		City			F	Zip Code	•
8. The above	named entity submits this statement for	the purpose of changing its re	gistered office o	r registere	ed agent, or both, in			_
F After Septe	Signature, typed or printed name of registered agent an FILE NOW: FEE IS \$61.25 ember 12, 2001, min. will be \$23	9. Election Campa 6.25 Trust Fund Cor	ntribution.		\$5.00 May Be Added to Fees	Departi	eck Payable ment of State	
10.	OFFICERS AND DIRE		11.	A	ADDITIONS/CHANGE	S TO OFFICERS AND		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SUBIN, IRA 1101 S. HILLCREST CT. HOLLYWOOD FL 33021	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		TX. FAITH SO. HILLER LYWOOD, P		☐ Change	Addition &
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SEVERANCE, JOHN 1011 S. HILLCREST CT. HOLLYWOOD FL 33021	X Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEV 1101	ERANCE, J SO. HILLCRI LYWOOD, F	OHN EST CT:	⊠ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WHITE, JUNE 1001 S. HILLCREST CT. HOLLYWOOD FL 33021	X Deletë	TITLE NAME STREET ADDRESS CITY-ST-ZIP	WH	ITE, TUNE 50. HILLY LYWOOD,	PEST CT.	Change Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BECKERMAN, WENDY 1101 S. HILLCREST CT. HOLLYWOOD FL 33021	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	BEI	CKERMAN SD. HILL LYWOOD	WENDY DEST CT.	X Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			,	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition

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 SEVERANCE QUILLE Swerom 7-12-01 954-964-4982