

FILED
Jul 04, 2002 8:00 am
Secretary of State

07-04-2002 90549 013 ****61.25

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N44634
1. Entity Name
HILLCREST APTS BLDG #9

DO NOT WRITE IN THIS SPACE

80127088

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip
County

3. Mailing Address
1001 Hillcrest Ct
Suite, Apt. #, etc.
City & State
Hollywood
Zip
FL
Country
USA

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

4. FSI Number
65-0312938
Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent
Name SUZANNE BROWN
Street Address (P.O. Box Number if Not Applicable)
1001 Hillcrest Ct #302
City Hollywood, FL State 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 Barbara Coffey, Manager
Signature typewritten printed name of registered agent and title of individual (NOTE: Registered Agent Signature required when reselecting) DATE

FEE IS \$81.25
Initial or Amended-UBR

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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>SUZANNE BROWN #302</u> <u>P</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>PEARL NATHANSON #112</u> <u>VP</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>MONICA McBEAN</u> <u>ST #212</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>SYLVIA +</u> <u>PHIL ORENZO #102</u> <u>D</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>JOSEPH MCGEE #</u> <u>D 301</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 517, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Pearl Nathanson

Vice President

CR2E037B (12/01)