

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 725490

**FILED**  
**Apr 18, 2014**  
**Secretary of State**  
**CC8616440551**

**Entity Name:** HILLCREST MANOR HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O MAUREEN A. NATION  
13901 JOYCE DRIVE  
LARGO, FL 33774-4002

**Current Mailing Address:**

P. O. BOX 64  
INDIAN ROCKS BEACH, FL 33785-0064 US

**FEI Number: 59-1618605**

**Certificate of Status Desired: No**

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

NATION, MAUREEN A.  
13901 JOYCE DRIVE  
LARGO, FL 33774-4002 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: MAUREEN A. NATION**

**04/18/2014**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SOCKETT, ANDREW  
Address        13840 JOYCE DRIVE  
City-State-Zip: LARGO FL 33774

Title            VICE PRESIDENT.  
Name            EDMISTON, THOMAS  
Address        13639 PINECREST DRIVE  
City-State-Zip: LARGO FL 33774

Title            EXECUTIVE SECRETARY  
Name            NATION, MAUREEN A.  
Address        13901 JOYCE DRIVE  
City-State-Zip: LARGO FL 33774-4002

Title            TREASURER  
Name            MAURO, MICHAEL  
Address        11160 - 137TH STREET, N.  
City-State-Zip: LARGO FL 33774

Title            DIRECTOR  
Name            PLACE, JOSEPH  
Address        11177 HAMMOCK DRIVE  
City-State-Zip: LARGO FL 33774

Title            DIRECTOR  
Name            FINNEGAN, MARY  
Address        11160 HAMMOCK DRIVE  
City-State-Zip: LARGO FL 33774

Title            DIRECTOR  
Name            WINN, MARILYN  
Address        13821 JOYCE DRIVE  
City-State-Zip: LARGO FL 33774

Title            DIRECTOR  
Name            BAKER, JENETH  
Address        13983 PINECREST DRIVE  
City-State-Zip: LARGO FL 33774

*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: MAUREEN A. NATION**

**SECRETARY**

**04/18/2014**

Electronic Signature of Signing Officer/Director Detail

Date