

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000004136

**FILED**  
**Apr 16, 2018**  
**Secretary of State**  
**CC0636545103**

**Entity Name:** HILLSBORO PINES CIVIC ASSOCIATION, INC.

**Current Principal Place of Business:**

5001 NW 76 PL .  
POMPANO BEACH, FL 33073

**Current Mailing Address:**

5001 NW 76 PL .  
POMPANO BEACH, FL 33073

**FEI Number:** 65-1033677

**Certificate of Status Desired:** No

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

VANDEREEDT, PAMELA  
5001 NW 76 PL.  
POMPANO BEACH, FL 33073 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P, VP  
Name WISOCKI, PHILLIP  
Address 5015 NW 77 CT.  
City-State-Zip: POMPANO BEACH FL 33073

Title T  
Name VANDEREEDT, PAMELA  
Address 5001 NW 76TH PLACE  
City-State-Zip: POMPANO BEACH FL 33073

Title D, S  
Name OLIVER, KELLI  
Address 5410 NW 74 PL  
City-State-Zip: POMPANO BEACH FL 33073

*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:** PAMELA VANDEREEDT

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04/16/2018

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date