

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11088

Entity Name: HILLCREST VILLAGE PROPERTY OWNERS ASSOCIATION, INC.**FILED**
Feb 01, 2024
Secretary of State
4680956340CC**Current Principal Place of Business:**7084 W GULF TO LAKE HWY
SUITE 2A
CRYSTAL RIVER, FL 34429**Current Mailing Address:**7084 W GULF TO LAKE HWY
SUITE 2A
CRYSTAL RIVER, FL 34429 US**FEI Number: 59-2588309****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**PARKLANE REAL ESTATES SERVICES
7084 W GULF TO LAKE HWY
SUITE 2A
CRYSTAL RIVER, FL 34429 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: DORA STEED****02/01/2024**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** MCA/DIRECTOR
Name HERD, GREG
Address 7084 W GULF TO LAKE HWY
SUITE 2A
City-State-Zip: CRYSTAL RIVER FL 34429**Title** PRESIDENT
Name O'CONNELL, HOWARD
Address 7084 W GULF TO LAKE HWY
SUITE 2A
City-State-Zip: CRYSTAL RIVER FL 34429**Title** VP
Name HENDERSON, RON
Address 7084 W GULF TO LAKE HWY
SUITE 2A
City-State-Zip: CRYSTAL RIVER FL 34429**Title** TREASURER
Name CUNNINGHAM, ED
Address 7084 W GULF TO LAKE HWY
SUITE 2A
City-State-Zip: CRYSTAL RIVER FL 34429**Title** SECRETARY
Name MARKWOOD, GEORGE
Address 7084 W GULF TO LAKE HWY
SUITE 2A
City-State-Zip: CRYSTAL RIVER FL 34429

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: HOWARD O'CONNELL**PRESIDENT****02/01/2024**

Electronic Signature of Signing Officer/Director Detail

Date