2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48487

Entity Name: HILLCREST CONDOMINIUM NO. 1, INC.

FILED Mar 02, 2023 **Secretary of State** 7146295420CC

Current Principal Place of Business:

4800 N. STATE RD. 7

SUITE 105

LAUDERDALE LAKES, FL 33319

Current Mailing Address:

4800 N. STATE RD. 7 SUITE 105

LAUDERDALE LAKES, FL 33319

FEI Number: 65-0383857 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PHOENIX MANAGEMENT SERVICES 4800 N. STATE RD. 7 SUITE 105 LAUDERDALE LAKES, FL 33319 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:

City-State-Zip:

Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **TREASURER** Title SECRETARY

Name PORTENZA, BARBARA Name PORTENZA, BARBARA

5200 WASHINGTON ST 5200 WASHINGTON STREET Address Address

#202

City-State-Zip: HOLLYWOOD FL 33021 City-State-Zip: HOLLYWOOD FL 33021

Title VΡ Title **PRESIDENT**

Name SEDACCA, GILDA Name **ELLIOTT, THOMAS MATTHEW**

Address 5200 WASHINGTON APT 102 Address 877 CARRABELLA TERRACE **APT 201**

City-State-Zip: THE VILLAGES FL 32162 City-State-Zip: HOLLYWOOD FL 33021-7768

Title **OFFICER** Title **OFFICER**

Name DELUCA, WILLIAM RIGGIONE, ANN Name

Address 5200 WASHINGTON STREET Address

5200 WASHINGTON STREET

City-State-Zip: HOLLYWOOD FL 33021 HOLLYWOOD FL 33021

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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.

03/02/2023 SIGNATURE: THOMAS ELLIOTT **PRESIDENT**