

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48487

Entity Name: HILLCREST CONDOMINIUM NO. 1, INC.

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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TREASURER
Name	PORTENZA, BARBARA
Address	5200 WASHINGTON ST #202
City-State-Zip:	HOLLYWOOD FL 33021
Title	VP
Name	SEDACCA, GILDA
Address	5200 WASHINGTON APT 102 APT 201
City-State-Zip:	HOLLYWOOD FL 33021-7768
Title	OFFICER
Name	RIGGIONE, ANN
Address	5200 WASHINGTON STREET 104
City-State-Zip:	HOLLYWOOD FL 33021

Title	SECRETARY
Name	PORTENZA, BARBARA
Address	5200 WASHINGTON STREET 202
City-State-Zip:	HOLLYWOOD FL 33021
Title	PRESIDENT
Name	ELLIOTT, THOMAS MATTHEW
Address	877 CARRABELLA TERRACE
City-State-Zip:	THE VILLAGES FL 32162
Title	OFFICER
Name	DELUCA, WILLIAM
Address	5200 WASHINGTON STREET 307
City-State-Zip:	HOLLYWOOD FL 33021

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: THOMAS ELLIOTT

PRESIDENT

04/26/2024

Electronic Signature of Signing Officer/Director Detail

Date