

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 25, 2008 8:00 am
Secretary of State

04-25-2008 90147 006 ***150.00

DOCUMENT # 168914
 1. Entity Name
HILLCREST LODGE, INC.



Principal Place of Business Mailing Address
241 PALM AVE **241 PALM AVE**
BABSON PARK FL 33827 **BABSON PARK FL 33827**



2. Principal Place of Business - No P.O. Box # 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

1st MOORE CR2E034 (10/07)

City & State City & State

4. FEI Number Applied For
59-0703068 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
SEVERIN, ALBERTA R
241 PALM AVE
BABSON PARK FL 33827

7. Name and Address of New Registered Agent
 Name **STEVEN G. CAMPBELL**
 Street Address (P.O. Box Number is Not Acceptable)
241 Palm AVE
 City **Babson Park** FL Zip Code **33827**

8. 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. I am familiar with, and accept the obligations of registered agent.
 SIGNATURE *[Signature]* DATE **April 10, 2008**

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	SEVERIN, JOHN E	
STREET ADDRESS	241 PALM AVE	
CITY-ST-ZIP	BABSON PARK FL 33827	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SEVERIN, ALBERTA R	
STREET ADDRESS	241 PALM AVE	
CITY-ST-ZIP	BABSON PARK FL 33827	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SEVERIN, JOHN E	
STREET ADDRESS	241 PALM AVE	
CITY-ST-ZIP	BABSON PARK FL 33827	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STEVEN G. CAMPBELL	
STREET ADDRESS	241 Palm AVE	
CITY-ST-ZIP	Babson Park, Fl. 33827	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reports is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with or other like empowered.

SIGNATURE: *Alberta R Severin* DATE: **January 25-08** Daytime Phone #: **863 638-1712**