

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 712069

**FILED**  
**Feb 21, 2011**  
**Secretary of State**

**Entity Name:** HILLCREST CONDOMINIUM, INC.

**Current Principal Place of Business:**

1100 HOMESTEAD RD N  
SUITE A  
LEHIGH ACRES, FL 33936 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 159  
LEHIGH ACRES, FL 33790 US

**New Mailing Address:**

**FEI Number:** 59-1286134

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHIELDS, CHRISTOPHER J  
PAVESE, GARNER, HAVERFIELD ET AL  
1833 HENDRY ST  
FT MYERS, FL 33901 US

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

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

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** SCHAEFER, NORMAN  
**Address:** 1372 ARCHER STREET # 5  
**City-St-Zip:** LEHIGH ACRES, FL 33972 US

**Title:** D  
**Name:** RICHTER, DIANE  
**Address:** 6020 TERRACE  
**City-St-Zip:** FORT MYERS, FL 33905 US

**Title:** S,T  
**Name:** GILMAN, LINDA  
**Address:** 1372 ARCHER STREET #4  
**City-St-Zip:** LEHIGH ACRES, FL 33972 US

**Title:** VP  
**Name:** BROWN, SUE  
**Address:** 1372 ARCHER STREET #6  
**City-St-Zip:** LEHIGH ACRES, FL 33936 US

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:** SUE BROWN

VP

02/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date