


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 8:00 am
Secretary of State

03-13-2006 90081 026 ****61.25

DOCUMENT # 721707 1. Entity Name HILLTOP CONDOMINIUM, INC.					
Principal Place of Business C/O LAKEVIEW MANAGEMENT, INC. 13388 SW 128 STREET MIAMI, FL 33186 US			Mailing Address C/O LAKEVIEW MANAGEMENT, INC. 13388 SW 128 STREET MIAMI, FL 33186 US		
2. Principal Place of Business <i>Caribbean Property Mgt.</i> Suite, Apt. #, etc. 12301 S.W. 132 CT. City & State miami, FL Zip 33186 Country USA			3. Mailing Address <i>Caribbean Property Mgt.</i> Suite, Apt. #, etc. 12301 S.W. 132 CT. City & State miami, FL Zip 33186 Country USA		
4. FEI Number 59-1383692				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BUNETTA, SUE C 13388 SW 128 STREET MIAMI, FL 33186			7. Name and Address of New Registered Agent Name <i>Caribbean Property Management</i> Street Address (P.O. Box Number is Not Acceptable) 12301 S.W. 132 CT. City miami FL Zip Code 33186		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV LERNER, HOWARD 8862 SW 62 TERRACE MIAMI, FL 33173	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Joan Sampieri 9031 SW 62 Terr. #4E miami, FL 33173	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT HOFFMEISTER, JACK 8859 SW 62 TERR. MIAMI, FL 33173	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Clifford Young 9032 SW 62 Terr #35 miami, FL 33173	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DELGADO, PATRICIA 6171 SW 90 CT. MIAMI, FL 33173	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Scott Weyman 9044 SW 62 Terr. #3C miami, FL 33173	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PASQUARELLA, RENE 3277 SW 80 CT. MIAMI, FL 33173	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KNIGHT, JILL 6160 SW 90 CT. MIAMI, FL 33173	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <u>3/9/06</u> Daytime Phone # _____		

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