

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 26, 2005 8:00 am
Secretary of State

01-26-2005 90002 028 ****61.25

DOCUMENT # 762426

1. Entity Name

HILLCREST ESTATES, INC.



Principal Place of Business

HILLCREST ESTATE, INC.
ZEPHYRHILLS FL 33542
US

Mailing Address

39101 HEATH DR.
ZEPHYRHILLS FL 33540
US

40006373



1st MOORE CR2E037 (10/04)

2. Principal Place of Business

HILLCREST Estates, INC.

Suite, Apt. #, etc.

3. Mailing Address

HEATH DR. 39101

Suite, Apt. #, etc.

City & State

ZEPHYRHILLS FL

City & State

ZEPHYRHILLS FL

4. FEI Number

65-0017982

Applied For

Not Applicable

Zip

33542

Country

PASCO

Zip

33542

Country

PASCO

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TRUELSEN, ELAINE M
39116 HILLCREST DR.
ZEPHYRHILLS FL 33542

7. Name and Address of New Registered Agent

Name
ELAINE TRUELSEN

Street Address (P.O. Box Number is Not Acceptable)

39116 HILLCREST, DR.

City

ZEPHYRHILLS

FL

Zip Code

33542

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

Elaine Truelsen Secretary-Treasurer

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

January 21, 2005
DATE

FILE NOW: FEE IS \$61.25

Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE P
NAME ARSENAULT, ROGER ☒ Delete
STREET ADDRESS 6251 23RD STREET
CITY-ST-ZIP ZEPHYRHILLS FL 33540

TITLE VP
NAME HUNGATE, JAMES ☐ Delete
STREET ADDRESS 39019 HEATH DR.
CITY-ST-ZIP ZEPHERHILL FL 33542

TITLE ST
NAME TRUELSEN, ELAINES M ☐ Delete
STREET ADDRESS 39116 HEATH DR.
CITY-ST-ZIP ZEPHYRHILLS FL 33542

TITLE D
NAME CURRIER, RICHARD ☐ Delete
STREET ADDRESS 39048 HEATH DR.
CITY-ST-ZIP ZEPHYRHILLS FL 33542

TITLE D
NAME ELLIOTT, VERA ☐ Delete
STREET ADDRESS 39020 HEATH DR
CITY-ST-ZIP ZEPHERHILLS FL 33542

TITLE D
NAME WAYMAN, ONEAL ☒ Delete
STREET ADDRESS 39105 HEATH DRIVE
CITY-ST-ZIP ZEPHYRHILLS FL 33540

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☒ Change ☐ Addition
NAME DAVE PETERS
STREET ADDRESS 39122 HILLCREST DR.
CITY-ST-ZIP ZEPHYRHILLS, INC. FL 33542

TITLE VP ☐ Change ☐ Addition
NAME HUNGATE, JAMES
STREET ADDRESS ZEPHYRHILLS, FL. 33542

TITLE ST ☐ Change ☐ Addition
NAME TRUELSEN, ELAINE
STREET ADDRESS 39116 Heath Dr.
CITY-ST-ZIP Zephyrhills, FL 33542

TITLE D ☐ Change ☐ Addition
NAME Currier, Richard
STREET ADDRESS 39048 Heath Dr.
CITY-ST-ZIP Zephyrhills, FL 33542

TITLE D ☐ Change ☐ Addition
NAME Elliot, Vera
STREET ADDRESS 39020 Heath Dr.
CITY-ST-ZIP Zephyrhills, FL. 33542

TITLE D ☒ Change ☐ Addition
NAME Doris Austin
STREET ADDRESS 39152 Hillcrest Dr.
CITY-ST-ZIP Zephyrhills, FL 33542

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(5)(b), 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:

Elaine Truelsen

ELAINE TRUELSEN 1-21-05 813-788-3307

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #