## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000003596

Entity Name: HILLCREST APARTMENTS I, LLC

FILED Apr 28, 2006 Secretary of State

Current Principal Place of Business:			New Prince	New Principal Place of Business:			
	JASTI ROAD, : , CA 91761	SUITE 800					
Current Mailing Address:			New Maili	New Mailing Address:			
	JASTI ROAD, : , CA 91761	SUITE 800					
FEI Number:	54-2103736	FEI Number Applied For()	FEI Number Not App	licable ( )	Certificate of Status D	esired ( )	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:			
2450 HÓLI	AWRENCE LYWOOD BLV DOD, FL 33020						
	named entity s e of Florida.	submits this statement for the	purpose of changing i	ts registered o	office or registered ag	ent, or both,	
SIGNATUR							
	Electron	ic Signature of Registered Ag	ent	Date			
Election Car	npaign Financing	Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () GARCIA, ALEXA 3281 E GUASTI ONTARIO, CA S	RD #800	Title: Name: Address: City-St-Zip:	(	) Change()Addition		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	P ( MELTON, BILL 3281 E GUAST ONTARIO, CA	TRD #800		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: Citv-St-Zip:	MONIAK, RICH	REET P.O BOX #492		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALEX GARCIA P 04/28/2006