

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L93000000025

FILED
Feb 17, 2011
Secretary of State

Entity Name: HILLS APARTMENT COMMUNITIES, L.C.

Current Principal Place of Business:

2355 W. MICHIGAN AVE.
O-2
PENSACOLA, FL 32526

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 48
% JOHN E. SYLVESTER JR.
ORR'S ISLAND, ME 04066

New Mailing Address:

FEI Number: 59-3175705

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATE ACCESS, INC.
236 E. 6TH AVE.
TALLAHASSEE, FL 32303 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: SYLVESTER, JOHN E JR
Address: 1 LOWELL COVE ROAD P.O. BOX 48
City-St-Zip: ORRS ISLAND, ME 040660048 US

Title: MGRM
Name: SYLVESTER, KATHLEEN M
Address: 1 LOWELL COVE ROAD, P. O. BOX 48
City-St-Zip: ORRS ISLAND, ME 040660048 US

Title: MGRM
Name: JOHN E. SYLVESTER CORP, A MAINE CORPORATIO
Address: 1 LOWELL COVE ROAD, P.O. BOX 48
City-St-Zip: ORRS ISLAND, ME 040660048 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KATHLEEN M. SYLVESTER

MGRM

02/17/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date