2007 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N17684

HILLWOOD CONDOMINIUM ASSOCIATION, INC.



Principal Place of Businessy, ... PROFESSIONAL COMMUNITY MGMT. INC. Mailing Address

PROFESSIONAL COMMUNITY MGMT. INC.

40072933

FILED Apr 20, 2007 8:00 am Secretary of State

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786 BLANDING BLVD. #118 786 BLANDING BLVD. # ORANGE PARK, FL 32065 ORANGE PARK, FL 320												 	
Principal Place of Business - No P.O. Box # 3. Mailing Address													
Suite, Apt.	#, etc.		Su	Suite, Apt. #, etc.				04162007	Chg-	NP	CR2	E037 (1 2 /06)	
City & Stat	e		Cit	City & State				4. FEI Number Applied For 63-0948031 Not Applicable					
Zip Country			Zip	p Country				5. Certificate of Status Desired \$8.75 Additional Fee Required					
	- 6. Name	and Address of Curren	t Registere	d Agent				7. Name an	d Addres	s of New R	Registere	d Agent	
PERRY, ALAN 786 BLANDING BLVD #118						Name Street A	ddrass (f	P.O. Box Num	her is Not	Acceptable	۵۱		
ORANGE						Sireer	iddicss (i	.C. Box Num	DEI 15 1401	Acceptable			
						City					F	Zip Coo	ie
	named entit	ty submits this statement f tered agent.	for the purp	ose of changing its	register	! ed office o	r register	ed agent, or b	oth, in the	State of Fk	orida. La	am familiar with	, and accept
SIGNATURE .	Signature, lyped	d or printed name of registered ager	nt and title il app	licable. (NOTE	E. Registere	d Agent signat	ture required	when reinstating)	,		DAT	E	
Filing Fee is \$61.25 Due by May 1, 2007				9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May	D May Be to Fees Florida Department of State					
	Due by n	may 1, 2007		Trust Fund C	JOHUIDUL	1011.	_	Added to Fee	:s	1 101	rida Dep	partment of S	late
10.	Due by n	OFFICERS AND D	IRECTORS	Trust rung C	11.							DIRECTORS II	
10.	Due by n		DIRECTORS	☐ Delete									
		OFFICERS AND D	DIRECTORS		11.							DIRECTORS II	N 10
TITLE	DT BEDARD	OFFICERS AND D	DIRECTORS		11. TITLE							DIRECTORS II	N 10
TITLE NAME	DT BEDARD 306 BRAN	OFFICERS AND D	DIRECTORS		11. TITLE NAM STRE	E E						DIRECTORS II	N 10
TITLE NAME STREET ADDRESS	DT BEDARD 306 BRAN	OFFICERS AND D , PAULA NCH WOOD LANE	DIRECTORS		11. TITLE NAM STRE	E E EET ADDRESS -ST-ZIP						DIRECTORS II	N 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT BEDARD 306 BRAN JACKSON	OFFICERS AND D , PAULA NCH WOOD LANE	I DIRECTORS	□ Delete	11. THE NAM STRE CITY	E E EET ADORESS -ST-ZIP						DIRECTORS II	N 10 Addition
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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:

RINTED NAME OF SIGNING OFFICER OR DIRECTOR