

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36062

FILED
Apr 23, 2007
Secretary of State

Entity Name: HILLCREST NO. 3 CONDOS, INC.

Current Principal Place of Business:

940 S. HILLCREST COURT
HOLLYWOOD, FL 33021 US

New Principal Place of Business:

Current Mailing Address:

940 S. HILLCREST COURT
HOLLYWOOD, FL 33021 US

New Mailing Address:

FEI Number: 65-0164931

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOWELL, BETTY
940 HILLCREST COURT #306
HOLLYWOOD, FL 33021 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HOWELL, BETTY
Address: 940 HILLCREST CT 306
City-St-Zip: HOLLYWOOD, FL 33021

Title: SD () Delete
Name: HOWELL, BETTY
Address: 940 S. HILLCREST CT., # 306
City-St-Zip: HOLLYWOOD, FL 33021

Title: T () Delete
Name: VAZQUEZ, MARIA
Address: 940 HILLCREST CT 104
City-St-Zip: HOLLYWOOD, FL 33021

Title: BM () Delete
Name: BARRON, CORRINE
Address: 940 HILLCREST CT110
City-St-Zip: HOLLYWOOD, FL 33021

Title: BM () Delete
Name: CANTANA, LORRAINE
Address: 940 HILLCREST ST CT 212
City-St-Zip: HOLLYWOOD, FL 33021

Title: BM () Delete
Name: KOHL, HARRIET
Address: 940 HILLCREST CT 106
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BETTY HOWELL

P

04/23/2007

Electronic Signature of Signing Officer or Director

Date