2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 04, 2006 8:00 am
Secretary of State
05-04-2006 90226 042 ****61.25

DOCUMENT # N36106

1. Entity Name

HILLCREST COUNTRY CLUB CONDOMINIUM NO. 10 ASSOCIATION, INC.

Principal Place of Business	Mailing Address
981 S. HILLCREST CT. HOLLYWOOD FL 33021 US	981 S. HILLCREST CT. HOLLYWOOD FL 33021 US

1st MOORE CR2E037 (10/05)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-0233016 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MACALEINE, PATRICIA 981 S HILLCREST CT BLDG 10 APT 108 HOLLYWOOD FL 33021	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2006

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP MCLEROP, SEAN 981 HILLCREST CT #105 HOLLYWOOD FL 33021	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT PATRICIA MACALPINE 981 Hellcrest Ct #109 Hwd, Fl. 33021	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T JOSEPH, ESTELLE 981 S HILLCREST CT 211 HOLLYWOOD FL 33021	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	WALDO LAURENCIO - Vice Pres. 981 Hillcrest Ct #302 Hollywood Fl. 33021	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP ALPINE, PATRICIA M 981 S HILLCREST CT 109 HOLLYWOOD FL 33021	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER LINDA CHARDoneau 981 Hellcrest Ct #214 Hwd Fl 33021	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MCLEROY, SEAN 981 S. HILLCREST CT. #105 HOLLYWOOD FL 33021	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY PATRICIA DeLUCA 981 Hellcrest Ct #315 Hwd, Fl. 33021	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S OCCENAD, MICHELE 981 HILLCREST CT., #306 HOLLYWOOD FL 33021	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR ESTELLE JOSEPH #211 981 Hellcrest Ct Hwd, Fl. 33021	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Patricia Macaleine - President 4/26/06