2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2009
Secretary of State

DOCUMENT# N38602

Entity Name: HILLCREST COUNTRY CLUB NO. 18 CONDOMINIUM, INC.

Current Principal Place of Business:

4650 WASHINGTON ST
402
HOLLYWOOD, FL 33021 US

New Principal Place of Business:

4650 WASHINGTON ST
HOLLYWOOD, FL 33021 US

Current Mailing Address:

4650 WASHINGTON ST
402
HOLLYWOOD, FL 33021 US

New Mailing Address:

4650 WASHINGTON ST
HOLLYWOOD, FL 33021 US

FEI Number: 65-0196372 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SEREIX, SUE F
4650 WASHINGTON STREET
SUITE 101
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: KOONTZ, ROBERT
Address: 4650 WASHINGTON ST #501
City-St-Zip: HOLLYWOOD, FL 33021

Title: D ( ) Delete
Name: TWARK, THOMAS
Address: 4650 WASHINGTON ST #303
City-St-Zip: HOLLYWOOD, FL 33021

Title: D ( ) Delete
Name: BOULANGER, LISE
Address: 4650 WASHINGTON ST #410
City-St-Zip: HOLLYWOOD, FL 33021

Title: D ( ) Delete
Name: WALROND, JR, KENNETH P
Address: 4650 WASHINGTON ST #311
City-St-Zip: HOLLYWOOD, FL 33021

Title: D ( ) Delete
Name: CICHA, LOTTIE
Address: 4650 WASHINGTON ST #302
City-St-Zip: HOLLYWOOD, FL 33021

Title: ST ( ) Delete
Name: SEREIX, SUE F
Address: 4650 WASHINGTON ST #101
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: KOONTZ, ROBERT
Address: 4650 WASHINGTON ST #402
City-St-Zip: HOLLYWOOD, FL 33021

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 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: SUE SEREIX ST 02/27/2009

Electronic Signature of Signing Officer or Director — Date