


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2008 8:00 am
Secretary of State

04-17-2008 90029 004 ***158.75

DOCUMENT # P05000065290 1. Entity Name HILLCREST FLORIDA HOLDINGS, INC.					
Principal Place of Business 8889 PELICAN BAY BLVD SUITE 202 NAPLES, FL 34108 US			Mailing Address 8889 PELICAN BAY BLVD SUITE 202 NAPLES, FL 34108		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address <i>8889 Pelican Bay Blvd.</i>			
Suite, Apt. #, etc.		Suite, Apt. #, etc. <i>Suite 200</i>			
City & State		City & State <i>Naples, FL</i>			
Zip	Country	Zip <i>34108</i>	Country <i>USA</i>	4. FEI Number 20-2830111	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent VEINTIMILLA, PABLO X 8889 PELICAN BAY BLVD SUITE 202 NAPLES, FL 34108				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <i>Suite 200</i> City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RUCKER, RONALD L 72 CYPRESS POINT DRIVE NAPLES, FL 34105	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>P/D</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FINGERSH, JACK N 8231 BAY COLONY DRIVE #1704 NAPLES, FL 34108	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>C/D</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLITT, IRWIN 3522 WEST 89TH STREET LEAWOOD, KS 66206	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JORDAN, JOHN L 8111 BAY COLONY DRIVE #603 NAPLES, FL 34108	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORANTZ, ROBERT A 3971 GULF SHORE BLVD NORTH #1802 NAPLES, FL 34103	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S VEINTIMILLA, PABLO X 767 COLDSTREAM COURT NAPLES, FL 34104	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>VP/S</i>
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 607, 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: <i>Pablo X Veintimilla / CFO</i>				Date: <i>4/15/08</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Daytime Phone #: <i>239-254-2984</i>	

* See page 4

ATTACHMENT

HILLCREST FLORIDA HOLDINGS, INC.
2008 FOR PROFIT CORPORATION ANNUAL REPORT

40070223

DOCUMENT: P05000065290

OFFICERS AND DIRECTORS ADDITIONS:

JOEL L. BAYER 1948 ORCHARD STREET CHICAGO, IL 60614	TITLE:	(D) DIRECTOR
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JOSEPH E. D'JAMOOS 9163 TORREFINO COURT NAPLES, FL 34109	TITLE:	(D) DIRECTOR
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