

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762426

Entity Name: HILLCREST ESTATES, INC.**Current Principal Place of Business:**39053 HEATH DRIVE
ZEPHYRHILLS,, FL 33542**Current Mailing Address:**39053 HEATH DRIVE
ZEPHYRHILLS,, FL 33542 US**FEI Number:** 32-0599465**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CUTLIFFE, RICHARD
39153 HILLCREST DRIVE
ZEPHYRHILLS, FL 33542 US*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:** RICHARD CUTLIFFE

03/10/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	HALEY, EVERETT
Address	39030 HEATH DRIVE
City-State-Zip:	ZEPHYRHILLS FL 33542

Title	SECRETARY
Name	SCHWANDT, CHERYL
Address	39020 HILLCREST DRIVE
City-State-Zip:	ZEPHYRHILLS FL 33542

Title	VP
Name	PENDOCK, KEN
Address	6251 23RD STREET
City-State-Zip:	ZEPHYRHILLS FL 33542

Title	DIRECTOR
Name	GRAHAM, LESLIE
Address	39205 HILLCREST DRIVE
City-State-Zip:	ZEPHYRHILLS FL 33542

Title	DIRECTOR
Name	GREENHAW, JAMES
Address	39133 HILLCREST DRIVE
City-State-Zip:	ZEPHYRHILLS FL 33542

Title	DIRECTOR
Name	DIXON, ROBERT
Address	39143 HILLCREST DRIVE
City-State-Zip:	ZEPHYRHILLS FL 33542

Title	TREASURER
Name	CUTLIFFE, RICHARD
Address	39153 HILLCREST DRIVE
City-State-Zip:	ZEPHYRHILLS FL 33542

I hereby 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 all other like empowered.

SIGNATURE: RICHARD CUTLIFFE

TREASURER

03/10/2025

Electronic Signature of Signing Officer/Director Detail

Date