

**2023 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:**39101 HEATH DRIVE  
ZEPHYRHILLS,, FL 33542 US**FEI Number:** 32-0599465**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RICHARDSON, DEBORA L  
39124 HEATH 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:** DEBORA RICHARDSON

01/26/2023

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            RICHARDSON, DEBORA L  
Address        39124 HEATH 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            MCDOUGAL, LESLIE  
Address        39205 HILLCREST DRIVE  
City-State-Zip: ZEPHYRHILLS FL 33542

Title            DIRECTOR  
Name            RENEE, ROGGIE  
Address        39145 HEATH DRIVE  
City-State-Zip: ZEPHYRHILLS FL 33542

Title            OTHER  
Name            FRENETTE, PAULA L  
Address        38539 BENIGER DRIVE  
City-State-Zip: ZEPHYRHILLS FL 33542

Title            DIRECTOR  
Name            NICHOLS, RICHARD  
Address        39008 HEATH 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:** DEBORA L RICHARDSON**SECRETARY**

01/26/2023

Electronic Signature of Signing Officer/Director Detail

Date