

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000275658

Entity Name: HILLCREST VENTURE MANAGEMENT, LLC**Current Principal Place of Business:**3001 HANSON DRIVE
CHARLOTTE, NC 28207**Current Mailing Address:**3001 HANSON DRIVE
CHARLOTTE, NC 28207**FEI Number:** 87-1219766**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TEDRICK, DANIEL L
711 HILLCREST ST.
TALLAHASSEE, FL 32308 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:**_____
Electronic Signature of Registered Agent_____
Date**Authorized Person(s) Detail :**

| | |
|-----------------|--------------------|
| Title | MGR |
| Name | TEDRICK, DANIEL L |
| Address | 3001 HANSON DRIVE |
| City-State-Zip: | CHARLOTTE NC 28207 |

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| Title | MGR |
| Name | BILLS, JESSICA T |
| Address | 5622 PENNOCK POINT ROAD |
| City-State-Zip: | JUPITER FL 33458 |

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| Title | MGR |
| Name | TEDRICK, HELEN M |
| Address | 711 HILLCREST ST. |
| City-State-Zip: | TALLAHASSEE FL 32308 |

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| Title | MGR |
| Name | TEDRICK, DAVID L |
| Address | 711 HILLCREST ST. |
| City-State-Zip: | TALLAHASSEE FL 32308 |

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DANIEL TEDRICK

MANAGER

03/06/2023

Electronic Signature of Signing Authorized Person(s) Detail_____
Date