

**CONDOMINIUM ASSOCIATION INFORMATION UPDATE FORM**

All information provided is public information. Changes are to be made by an officer of the condominium association. Please use a typewriter or print legibly in black ink.

Submit completed form to: DCCA – P&VLD  
Real Estate Commission  
335 Merchant Street, Room 333  
Honolulu, HI 96813

Name of Condominium Association: HI-Sierra AOA Registration #: 65

The information provided on this form is current as of March 30, 2024 and replaces the information previously provided to the Real Estate Commission ("Commission").

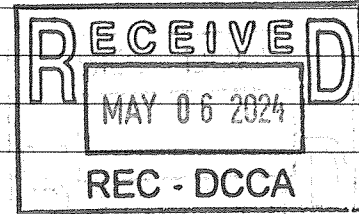
Please indicate the change being reported:

Names and positions of the officers of the association (President, Secretary and Treasurer required):

Lianne Stephanos - Secretary

Charlene Anaya - Treasurer

Rodney Matsumoto - Director



Designated officer of the association who can be contacted directly:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Officers Public Address: \_\_\_\_\_

Email Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Management status: (Check ONE only and fill in corresponding information)

Self-managed by the Association of Unit Owners (AOUO)

Name of Manager: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Managed by Condominium Managing Agent

Name: Equity Properties Inc. RB License Number: 13865

Contact Person: Michele Atamian Title: Principal Broker

Address: 500 Alakawa Street, Bldg. 214

Email Address: michi@epihawaii.biz Telephone Number: (808) 485-0855 ext. 1111

Contact designation (individual) to receive all AOUO correspondence (except bulletins) and telephone calls from the Commission:

Name of Manager: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Individual responsible for policy to provide reasonable access to persons authorized to serve civil process:

Name: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

Title: \_\_\_\_\_

Alternate Name: Michele Atamian Telephone No.: 808-485-0855 x111

Title: Property Manager

**I certify that I am authorized to sign this form on behalf of this condominium association, and that the information provided is true and correct.**



\_\_\_\_\_  
Signature of association officer, developer or 100% sole owner of condominium project

Māla Arkin

5/1/2024

Print Name

Date

**Check one only:**

- President  Vice - President  Secretary  Treasurer
- Developer or Developer's Agent registering for unorganized association
- 100% Sole Owner of Condominium Project

