

**NON-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 16, 2002 8:00 am
Secretary of State

05-27-2002 90427 040 ****61.25

DOCUMENT # 739445

1. Entity Name
Terrace Park of Five Towns, No. 10, Inc.
5925 & 5967 Terrace Park Drive
St. Petersburg, FL 33709

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
5925 & 5967 Terrace Park Drive
Suite, Apt. #, etc.

3. Mailing Address
a/o 103 Cleveland Ave. SW
Suite, Apt. #, etc.

City & State
St. Petersburg, FL

City & State
Largo, FL

Zip
33709

Country
Pinellas

Zip
33770

Country
Pinellas

4. FEI Number
59-2079584

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
Debra REinhardt

Street Address (P.O. Box Number is Not Acceptable)
103 Cleveland Ave. SW

City
Largo

FL Zip Code
33770

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.

SIGNATURE *Debra Reinhardt*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when re-registering)

DATE

FEB 13 441 25
Initial of Amended UBR

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>P/Director Frank Contey 5967 Terrace Park Dr. #B211 St. Petersburg, FL 33709</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>VP Director Angela Hester 5925 Terrace Park Drive #A203 St. Petersburg, FL 33709</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>T-Director Mary Richter 5967 Terrace Park Drive #B201 St. Petersburg, FL 33709</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>S/Director Marion Stewart 5925 Terrace Park Drive #A101 St. Petersburg, FL 33709</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>D Pat Gage 5925 Terrace Park Drive #A202 St. Petersburg, FL 33709</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 617, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE *Frank Contey*
Signature

3/18/02
Date

727/581-2662
Phone