

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743799

FILED
Jan 21, 2004
Secretary of State**Entity Name:** TERRACE PARK OF FIVE TOWNS, NO. 11-A, INC.**Current Principal Place of Business:**5980 TERRACE PARK DR., N.
STE 100
ST PETERSBURG, FL 33709**New Principal Place of Business:****Current Mailing Address:**5980 TERRACE PARK DR., N.
STE 100
ST PETERSBURG, FL 33709 US**New Mailing Address:****FEI Number:** 59-1923377**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**FISHER, PATRICIA T
5980 TERRACE PARK DR., N.
307
ST PETERSBURG, FL 33709 US**Name and Address of New Registered Agent:**

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

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: MUELLER, AL
Address: 5980 TERR PARK DRIVE N, #106
City-St-Zip: ST PETERSBURG, FL 33709**Title:** D () Delete
Name: GRIMSLEY, LENNY
Address: 5980 TERRACE PARK DR, #205
City-St-Zip: ST PETERSBURG, FL 33709**Title:** TD () Delete
Name: METZGER, GEORGE
Address: 5980 TERRACE PARK DRIVE N, #213
City-St-Zip: ST PETERSBURG, FL 33709**Title:** D () Delete
Name: FISHER, PATRICIA T
Address: 5980 TERRACE PARK DRIVE N, #307
City-St-Zip: ST PETERSBURG, FL 33709**Title:** D () Delete
Name: DANZIEL, ED
Address: 5980 TERRACE PARK DRIVE N, #310
City-St-Zip: ST PETERSBURG, FL 33709**Title:** SD () Delete
Name: HULBERT, JACQUELINE L
Address: 5980 TERRACE PARK DRIVE N, #309
City-St-Zip: ST PETERSBURG, FL 33709**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** D (X) Change () Addition
Name: FOULKE, PHILLIP
Address: 5980 TERRACE PARK DR, #109
City-St-Zip: ST PETERSBURG, FL 33709**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GEORGE METZGER

TREA

01/21/2004

Electronic Signature of Signing Officer or Director

Date