

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747933

FILED
Apr 03, 2009
Secretary of State

Entity Name: TERRACE PARK OF FIVE TOWNS, NO. 18, INC.

Current Principal Place of Business:

5971 TERRACE PARK DR.N.
ST. PETERSBURG, FL 33709 US

New Principal Place of Business:

Current Mailing Address:

C/O RCM PROPERTY MGMT, INC.
PO BOX 47364
ST PETE, FL 33743

New Mailing Address:

FEI Number: 59-1992439 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOODY, RANDY C
6157 31ST AVENUE NORTH
ST. PETERSBURG, FL 33710 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: P () Delete
Name: GRIMMEL, ALMA
Address: 5971 TERRACE PARK DRIVE # 202
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: D () Delete
Name: GIETZEN, DONNA
Address: 5971 TERRACE PARK DR. N. #111
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: T () Delete
Name: OCONNOR, JANIS
Address: 5971 TERRACE PARK DR. N. #310
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: VP () Delete
Name: GONEVIEVE, STNKUS
Address: 5971 TERRACE PARK DR. N. #304
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: S () Delete
Name: JEAN, LYON
Address: 5971 TERRACE PARK DR. N. #104
City-St-Zip: SAINT PETERSBURG, FL 33709

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: STANKUS, GENEVIEVE
Address: 5971 TERRACE PARK DR. N. #304
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: LYON, JEAN
Address: 5971 TERRACE PARK DR. N. #104
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: D (X) Change () Addition
Name: GEITZEN, DONNA
Address: 5971 TERRACE PARK DR. N. #111
City-St-Zip: SAINT PETERSBURG, FL 33709

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ALMA GRIMMEL

P

04/03/2009

Electronic Signature of Signing Officer or Director

Date