

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751315

FILED
Apr 12, 2011
Secretary of State

Entity Name: TERRACE PARK OF FIVE TOWNS, NO. 21, INC.

Current Principal Place of Business:

5975 TERRACE PARK DRIVE NORTH
ST PETERSBURG, FL 33709 US

New Principal Place of Business:

Current Mailing Address:

FLORIDA COMMUNITY PROP MGMT
8141 54TH AVE NORTH
SAINT PETERSBURG, FL 33709 US

New Mailing Address:

8141 54TH AVENUE N
SAINT PETERSBURG, FL 33709 US

FEI Number: 59-2226804

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLORIDA COMM PROP MGMNT LLC
8141 54TH AVE N
SAINT PETERSBURG, FL 33709 US

Name and Address of New Registered Agent:

VESTA PROPERTY SERVICES, INC.
1021 OAK STREET
JACKSONVILLE, FL 32204 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: DANIEL P. ARMSTRONG

04/12/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: KEELER, MARYANN
Address: 5975 TERRACE PARK DR NORTH #103
City-St-Zip: ST PETERSBURG, FL 33709 US

Title: VP
Name: JOHNSON, ROBERT
Address: 5975 TERRACE PARK DR. NORTH #111
City-St-Zip: ST PETERSBURG, FL 33709 US

Title: S
Name: KEELER, MARYANN
Address: 5975 TERRACE PARK DR. NORTH # 103
City-St-Zip: ST PETERSBURG, FL 33709 US

Title: T
Name: GAUDINO, STEVEN
Address: 5975 TERRACE PK DRIVE N #301
City-St-Zip: ST PETERSBURG, FL 33709 US

Title: D
Name: FORS, VERNER
Address: 5975 TERRACE PK DRIVE N #308
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: D
Name: DIBISCEGLIE, MARIE
Address: 5975 TERRACE PK DRIVE N #110
City-St-Zip: ST PETERSBURG, FL 33709

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 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 all other like empowered.

SIGNATURE: MARYANN KEELER

P

04/12/2011

Electronic Signature of Signing Officer or Director

Date