

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2009
Secretary of State

DOCUMENT# N00000001000

Entity Name: TERRACE V AT LAKESIDE GREENS ASSOCIATION, INC.

Current Principal Place of Business:

12734 KENWOOD LANE
SUITE 49
FT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

12734 KENWOOD LANE
SUITE 49
FT MYERS, FL 33907

New Mailing Address:

FEI Number: 65-0988279 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROEDDING, DON
TROPICAL ISLES MANAGEMENT SERVICES, INC.
12734 KENWOOD LANE, SUITE 49
FT. MYERS, FL 33907 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: HELLMUELLER, JACK
Address: 4800 BLACKTREE CT
City-St-Zip: LOUISVILLE, KY 40222

Title: SD () Delete
Name: TOUSLEY, NEIL
Address: 2810 W WILLOWLAKE DR
City-St-Zip: PEORIA, IL 61614

Title: T () Delete
Name: LEVY, ALLAN
Address: 3 LYNDHURST PL
City-St-Zip: CHAMPAIGN, IL 61820

Title: VP () Delete
Name: HERRINGSHAW, JAMES
Address: 2811 STARK DRIVE
City-St-Zip: WILLOUGHBY, OH 44094

Title: D () Delete
Name: BROWN, LYN
Address: 8066 QUEEN PALM LANE #524
City-St-Zip: FT MYERS, FL 33966

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MOULTON, BILL
Address: 8066 QUEEN PALM #523
City-St-Zip: FORT MYERS, FL 33966

Title: S (X) Change () Addition
Name: WHITE, STEVE
Address: 8066 QUEEN PALM #514
City-St-Zip: FORT MYERS, FL 33966

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

Title: VP (X) Change () Addition
Name: O'BRIEN, FRANK
Address: 8066 QUEEN PALM #542
City-St-Zip: FORT MYERS, FL 33966

Title: P (X) Change () Addition
Name: BROWN, LYN
Address: 8066 QUEEN PALM LANE #524
City-St-Zip: FT MYERS, FL 33966

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: LYN BROWN

Electronic Signature of Signing Officer or Director

P

03/26/2009

Date