2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002830

FILED Mar 16, 2006 Secretary of State

Entity Name: TERRAVERDE 12 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

780 NW LEJUENE RD 17126 TERRAVERDE CIRCLE #616 FORT MYERS, FL 33908

MIAMI, FL 33126

Current Mailing Address: New Mailing Address:

780 NW LEJUENE RD 3364 CLEVELAND AVE. #616 FORT MYERS, FL 33901

#616 FORT MYERS, FL 338 MIAMI, FL 33126

FEI Number: 59-3740530 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MAYOR, REYNALDO
780 NW LEJUENE RD
4616
MIAMI, FL 33126 US
RAGER, KENNETH D
3364 CLEVELAND AVE
FORT MYERS, FL 33901 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: KENNETH D. RAGER 03/16/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 MAYOR, REYNALDO F
 Name:
 BADOLATI, DEBRA

 Address:
 780 NW LEJUENE RD #616
 Address:
 17126 TERRAVERDE CIRCLE #202

City-St-Zip: MIAMI, FL 33126 City-St-Zip: FORT MYERS, FL 33908

Title: SD () Delete Title: VP (X) Change () Addition Name: SCHOOF, DARREN Name: MUNNINGS, VIRGINIA

Address: 780 NW LEJEUENE RD #616 Address: 17126 TERRAVERDE CIRCLE #201

City-St-Zip: MIAMI, FL 33126 City-St-Zip: FORT MYERS, FL 33908

Title: D () Delete Title: S/T (X) Change () Addition
Name: MAYOR, MELISSA Name: WALTERS, SANDRA

 Address:
 780 NW LEJEUNE RD #616
 Address:
 14517 MESQUITE DRIVE

 City-St-Zip:
 MIAMI, FL 33126
 City-St-Zip:
 ORLAND, IL 60467

I hereby certify that the information supplied with this filing does not qualify for the 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: DEBRA BADOLATI PRES 03/16/2006