2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2009
Secretary of State

DOCUMENT# N01000002830

Entity Name: TERRAVERDE 12 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

17126 TERRAVERDE CIRCLE
FORT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

3364 CLEVELAND AVE.
FORT MYERS, FL 33901

New Mailing Address:

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

Name and Address of Current Registered Agent:

RAGER, KENNETH D
3364 CLEVELAND AVE
FORT MYERS, FL 33901 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: HEPNER, JUDY
Address: 17126 TERRANVERDE CIR., #3
City-St-Zip: FORT MYERS, FL 33908

Title: ST ( ) Delete
Name: DAY, ALBERT
Address: 17126 TERRANVERDE CIR., #9
City-St-Zip: FORT MYERS, FL 33908

Title: VP ( ) Delete
Name: MAUNNINGS, CARL
Address: 17126 TERRAUERDE CIRCLE #1
City-St-Zip: FORT MYERS, FL 33908

Title: D ( ) Delete
Name: HOM, CINDY
Address: 17126 TERRAUERDE CIRCLE #4
City-St-Zip: FORT MYERS, FL 33908

Title: D ( ) Delete
Name: TYTSVAER, JOHANNES
Address: 17126 TERRAUERDE CIRCLE #12
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: DAY, ALBERT
Address: 17126 TERRANVERDE CIR., #9
City-St-Zip: FORT MYERS, FL 33908

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

Title: ST (X) Change ( ) Addition
Name: DAVIS, DOLORES
Address: 17126 TERRAVERDE CIRCLE #9
City-St-Zip: FORT MYERS, FL 33908

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

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: JUDY HEPNER P 03/05/2009

Electronic Signature of Signing Officer or Director — Date