

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 05, 2009
Secretary of State**

DOCUMENT# N02000000552

Entity Name: TERRY AVENUE TOWNHOMES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

36 NORTH TERRY AVENUE
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

P.O BOX 4548
ORLANDO, FL 32802

New Mailing Address:

FEI Number: 02-0614865 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

NICHOLSON, LYNN S MR.
36 NORTH TERRY AVENUE
ORLANDO, FL 32801 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: DVP () Delete
Name: HAWKINS, ANNIE
Address: 38 N. TERRY AVE.
City-St-Zip: ORLANDO, FL 32801

Title: STD () Delete
Name: BAUMANN, FRED
Address: 606 W. WASHINGTON ST.
City-St-Zip: ORLANDO, FL 32801

Title: DP () Delete
Name: NICHOLSON, LYNN S MR.
Address: 36 NORTH TERRY AVE.
City-St-Zip: ORLANDO, FL 32801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change () Addition
Name: HAWKINS, ANNIE
Address: 38 N. TERRY AVE.
City-St-Zip: ORLANDO, FL 32801

Title: DVP (X) Change () Addition
Name: BAUMANN, FRED
Address: 606 W. WASHINGTON ST.
City-St-Zip: ORLANDO, FL 32801

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: LYNN S. NICHOLSON

Electronic Signature of Signing Officer or Director

DP

05/05/2009

Date