

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006855

FILED
May 29, 2009
Secretary of State

Entity Name: REEVES TERRACE RESIDENT ASSOCIATION, INC.

Current Principal Place of Business:

200 VICTOR AVENUE
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

200 VICTOR AVENUE
ORLANDO, FL 32801

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

GILBERT, PATRICIA
342 VICTOR 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: P () Delete
Name: GILBERT, PATRICIA
Address: 342 VICTOR AVENUE
City-St-Zip: ORLANDO, FL 32801

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GILBERT, PATRICIA
Address: 342 VICTOR AVENUE #4
City-St-Zip: ORLANDO, FL 32801

Title: V () Change (X) Addition
Name: WILSON, GLORIA
Address: 1719 EAST JACKSON COURT
City-St-Zip: ORLANDO, FL 32801

Title: S () Change (X) Addition
Name: LUCIEN, CARMEN
Address: 328 JOHNSON COURT
City-St-Zip: ORLANDO, FL 32801

Title: T () Change (X) Addition
Name: LINO, SONYA
Address: 342 VICTOR AVENUE
City-St-Zip: ORLANDO, FL 32801

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: PATRICIA GILBERT

P

05/29/2009

Electronic Signature of Signing Officer or Director

Date