

CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

2000

Corporation Name
**THE TERRA CIA CLUB
CONDOMINIUM
ASSOCIATION, INC**

DOCUMENT #
N.45328

FILED
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**SECRETARY OF STATE
TALLAHASSEE FLORIDA**

Address Principal Place of Business
**P.O. Box 10067
BRADENTON, FL 34282**
**HARMONY MNGT
4400 EL CONQUISTADOR
PKWY #13
BRADENTON FL 34210**

DO NOT WRITE IN THIS SPACE

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

Mailing Address 2a. Principal Place of Business
26
Suite, Apt. #, etc. Suite, Apt. #, etc.
27
City & State City & State
28
Zip County Zip Country
25 29 30

3. Date Incorporated or Qualified **9-26-91** 3a. Date of Last Report **1999**
4. FEI Number **65-0758165** Applied For
Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution
7. Nonprofit Exempt from \$138.75 Supplemental Fee **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
**JOHN HAGEETY
HARMONY MGT
4400 EL CONQUISTADOR PKWY #13
BRADENTON, FL 34210**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office, registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, am familiar with, and accept the obligations of, Section 607.0505 or 617.0505, Florida Statutes.
SIGNATURE *[Signature]* DATE **9/14/01**

12. OFFICERS AND DIRECTORS
1.1 TITLE **PRES D**
1.2 NAME **JAMES TONKIN**
1.3 STREET ADDRESS **2320 TERRA CIA BAY BLVD #102**
1.4 CITY-ST-ZIP **PALMETTO FL 34221**
2.1 TITLE **VICE PRES D**
2.2 NAME **SY KANYOK**
2.3 STREET ADDRESS **2320 TERRA CIA BAY BLVD #411**
2.4 CITY-ST-ZIP **PALMETTO, FL 34221**
3.1 TITLE **TREAS D**
3.2 NAME **GAYE QUEEN**
3.3 STREET ADDRESS **2320 TERRA CIA BAY BLVD # 705**
3.4 CITY-ST-ZIP **PALMETTO FL 34221**
4.1 TITLE **SECRETARY D**
4.2 NAME **DR. DAVID LEHNER**
4.3 STREET ADDRESS **2320 TERRA CIA BAY BLVD # 805**
4.4 CITY-ST-ZIP **PALMETTO, FL 34221**
5.1 TITLE **DIR @ LG D**
5.2 NAME **ED RICHARDSON**
5.3 STREET ADDRESS **2320 TERRA CIA BAY BLVD # 112**
5.4 CITY-ST-ZIP **PALMETTO, FL 34221**

13. CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
600003415516-2
-10/05/00--01038--013
*******61.25 *****61.25**
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
KE

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I have fulfilled all obligations concerning unclaimed property imposed by Chapter 717, Florida Statutes; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* (Date) **9-8-00** Daytime Phone #