

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90069 010 ****61.25

DOCUMENT # 745416

1. Entity Name

TERRACES OF FOREST LAKES CONDOMINIUM
ASSOCIATION, INC.



Principal Place of Business

5766 BRONX AVENUE
SUITE A
SARASOTA FL 34231

Mailing Address

5766 BRONX AVENUE
SUITE A
SARASOTA FL 34231

2. Principal Place of Business

6146 CLARK CENTER AVE

Suite, Apt. #, etc.

3. Mailing Address

6146 CLARK CENTER AVE

Suite, Apt. #, etc.



1st MOORE

CR2E037 (10/04)

City & State

SARASOTA FL

City & State

SARASOTA FL

4. FEI Number

59-2113083

Applied For

Not Applicable

Zip

34238

Country

USA

Zip

34238

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MANAGEMENT CONCEPTS OF SARASOTA COUNTY INC
5766 BRONX AVENUE
SUITE A
SARASOTA FL 34231

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

6146 CLARK CENTER AVE

City

SARASOTA

FL

Zip Code

34238

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME BALDWIN, ROBERT
STREET ADDRESS 2227 BENEVA TERRACE
CITY-ST-ZIP SARASOTA FL

TITLE VD ☐ Delete
NAME NOHEIMER, PHIL
STREET ADDRESS 2213 BENEVA TERRACE
CITY-ST-ZIP SARASOTA FL

TITLE SD ☐ Delete
NAME PERNA, ALBERT
STREET ADDRESS 2317 BENEVA TERRACE
CITY-ST-ZIP SARASOTA FL

TITLE TD ☐ Delete
NAME BRADY, ROSALIE
STREET ADDRESS 2215 BENEVA TERRACE
CITY-ST-ZIP SARASOTA FL 34232

TITLE D ☒ Delete
NAME EDDINGTON, JOANN
STREET ADDRESS 2205 BENEVA TERRACE
CITY-ST-ZIP SARASOTA FL 34232

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME OLSEN, MARY
STREET ADDRESS 2343 BENEVA TERRACE
CITY-ST-ZIP SARASOTA FL 34232

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rosalie W. Brady Rosalie W. Brady 4/28/05 941-922-0189
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #