### **2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 747933** 

Entity Name: TERRACE PARK OF FIVE TOWNS, NO. 18, INC.

FILED
Apr 08, 2013
Secretary of State
CC0982410460

# **Current Principal Place of Business:**

5971 TERRACE PARK DR.N. ST. PETERSBURG. FL 33709

### **Current Mailing Address:**

5971 TERRACE PARK DR.N. ST. PETERSBURG, FL 33709 US

FEI Number: 59-1992439 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

MOODY, RANDY C 6157 31ST AVENUE NORTH ST. PETERSBURG, FL 33710 US

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

#### Officer/Director Detail:

Title P Title VP

Name OCONNOR, JANIS Name ROCHE, CHUCK

Address 5971 TERRACE PARK DRIVE # 310 Address 5971 TERRACE PARK DR. N. #107 City-State-Zip: SAINT PETERSBURG FL 33709 City-State-Zip: SAINT PETERSBURG FL 33709

Title T Title D

Name D'AURIZIO, ELEANOR Name RHINE, CAROLE

Address 5971 TERRACE PARK DR. N. #108 Address 5971 TERRACE PARK DR N #110
City-State-Zip: SAINT PETERSBURG FL 33709 City-State-Zip: ST PETERSBURG FL 33709

Title D Title [

Name STANKUS, GENEVEIVE Name FURIO, TED

Address 5971 TERRACE PARK DR N #304 Address 5971 TERRACE PARK DR N #209
City-State-Zip: ST PETERSBURG FL 33709 City-State-Zip: ST PETERSBURG FL 33709

I hereby 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 all other like empowered.

SIGNATURE: CHUCK ROCHE VP

Electronic Signature of Signing Officer/Director Detail

04/08/2013