DOCUMENT#	N0200006287		

Entity Name: TERRACE V AT CEDAR HAMMOCK ASSOCIATION, INC.

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

12734 KENWOOD LANE SUITE 49 FT. MYERS, FL 33907

Current Mailing Address:

12734 KENWOOD LANE SUITE 49 FT. MYERS, FL 33907

FEI Number: 51-0427887

Name and Address of Current Registered Agent:

TROPICAL ISLES MANAGEMENT 12734 KENWOOD LN #49 FORT MYERS, FL 33907 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

Officer/Director Detail :

Title	P	Title	VP
Name	ARCHER, WILLIAM	Name	RUTH, RAY
Address	12734 KENWOOD LANE #49	Address	12734 KENWOOD LANE #49
City-State-Zip:	FORT MYERS FL 33907	City-State-Zip:	FORT MYERS FL 33907
Title	ST		
Name	MAGLICIC, ELLEN		
Address	12734 KENWOOD LANE #49		
City-State-Zip:	FORT MYERS FL 33907		

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.

Ρ

SIGNATURE: WILLIAM ARCHER

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date