

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Jan 30, 2008 8:00 am
Secretary of State

01-30-2008 90033 033 ****61.25

DOCUMENT # 705175

1. Entity Name

HIBISCUS TERRACE, INC.



Principal Place of Business

2400 N E 36TH ST
LIGHTHOUSE POINT FL 33064

Mailing Address

2400 N E 36TH ST
LIGHTHOUSE POINT FL 33064



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DIXON, FRANK
2400 NE 36TH ST APT. 12
LIGHTHOUSE POINT FL 33064

Name

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

City

FL

Zip Code

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 and title with reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By: May 1, 2008

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VD
NAME FLAMMIA, NANCY ☐ Delete
STREET ADDRESS 2400 NE 36TH ST #3
CITY-ST-ZIP LIGHTHOUSE POINT FL 33064

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

TITLE TD
NAME SULLIVAN, JANET ☐ Delete
STREET ADDRESS 2400 NE 36TH ST #4
CITY-ST-ZIP LIGHTHOUSE POINT FL 33064

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

TITLE SD
NAME MILLER, JANE ☐ Delete
STREET ADDRESS 2400 NE 36TH ST APT 8
CITY-ST-ZIP LIGHTHOUSE POINT FL 33064

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

TITLE PD ☒ Delete
NAME FAIRCHILD, JOY
STREET ADDRESS 2400 NE 36TH ST 1
CITY-ST-ZIP LIGHTHOUSE PT FL 33064

TITLE ☐ Change ☒ Addition
NAME D THOMAS DIXON
STREET ADDRESS 2400 NE 36TH ST #6
CITY-ST-ZIP LIGHTHOUSE APT, FL 33064

TITLE PD ☐ Delete
NAME DIXON, FRANK
STREET ADDRESS 2400 NE 36TH ST 12
CITY-ST-ZIP LIGHTHOUSE POINT FL 33064

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 exemptions contained in Section 119, 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: JANET SULLIVAN Janet Sullivan

1/26/08

954-782-3450