2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2009
Secretary of State

DOCUMENT# 705175

Entity Name: HIBISCUS TERRACE, INC.

Current Principal Place of Business:

2400 N E 36TH ST
LIGHTHOUSE POINT, FL 33064

New Principal Place of Business:

Current Mailing Address:

2400 N E 36TH ST
LIGHTHOUSE POINT, FL 33064

New Mailing Address:

FEI Number: 65-0385948 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title:	VD	( ) Delete
Name:	FLAMMIA, NANCY	
Address:	2400 NE 36TH ST #3	
City-St-Zip:	LIGHTHOUSE POINT, FL 33064	
Title:	TD	( ) Delete
Name:	SULLIVAN, JANET	
Address:	2400 NE 36TH ST #4	
City-St-Zip:	LIGHTHOUSE POINT, FL 33064	
Title:	SD	( ) Delete
Name:	MILLER, JANE	
Address:	2400 NE 36TH ST APT 8	
City-St-Zip:	LIGHTHOUSE POINT, FL 33064	
Title:	PD	( ) Delete
Name:	DIXON, FRANK	
Address:	2400 NE 36TH ST 12	
City-St-Zip:	LIGHTHOUSE POINT, FL 33064	
Title:	D	( ) Delete
Name:	DIXON, THOMAS	
Address:	2400 NE 36TH #6	
City-St-Zip:	LIGHTHOUSE POINT, FL 33064	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JANET SULLIVAN TD 02/01/2009
Electronic Signature of Signing Officer or Director — Date