

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714274

FILED  
May 04, 2009  
Secretary of State

Entity Name: GERMAINE TERRACE, INC.

## Current Principal Place of Business:

8360 W. OAKLAND PARK BLVD  
301  
SUNRISE, FL 33351 US

## Current Mailing Address:

PO BOX 452199  
SUNRISE, FL 33345 US

## New Principal Place of Business:

1133 S. UNIVERSITY DRIVE  
211  
PLANTATION, FL 33318 US

## New Mailing Address:

PO BOX 19439  
PLANTATION, FL 33324 US

FEI Number: 59-1352859      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

TUCKER & TIGHE, P.A.  
800 E. BROWARD BLVD #710  
FORT LAUDERDALE, FL 33301 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: T ( ) Delete  
Name: STRATOULY, OLGA  
Address: 3223 NE 36H ST  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: S ( ) Delete  
Name: SNEED, JOHN  
Address: 3223 NE 56ST #2  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: STRATOULY, OLGA G  
Address: 3223 NE 36H ST #5  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: DS (X) Change ( ) Addition  
Name: SNEED, JOHN  
Address: 3223 NE 56ST #2  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D ( ) Change (X) Addition  
Name: HATCH, MARIAH R  
Address: 542 PAWPAW COVE  
City-St-Zip: ANNAPOLIS, MD 21401

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: OLGA G. STRATOULY

DP

05/04/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date