FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

'95 APR 17 PM 4:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 717402 (2)

1. Corporation Name

GLENDALE TERRACE CONDOMINIUM, INC.

Principal Place of Business	Mailing Address
~~201 EAST JOEL BLVD.~~ 259 E. Joel Blvd LEHIGH ACRES FL 33936	~~POST OFFICE BOX 876~~ 259 E. Joel Blvd LEHIGH FL ~~33970~~ 33936 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
10/21/1969	05/01/1994

4. FEI Number: 59-1380996 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 259 E. Joel Blvd.	26 259 E. Joel Blvd.
Suite, Apt. #, etc.: 22	Suite, Apt. #, etc.: 27
City & State: 23 Lehigh, FL	City & State: 28 Lehigh, FL
Zip: 24 33936 Country: 25 Lee	Zip: 29 33936 Country: 30 Lee

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ORANGE STATE PROPERTY SERVICES INC. 259 E. JOEL BLVD. LEHIGH FL 33936	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: C. Allen Financial Mgr. DATE: 3-13-95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when updating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	President D	☒ Change ☐ Addition
NAME	ANDERSON, FRED	12 NAME	Curtis K. Allen	
STREET ADDRESS	401 IDA AVENUE	13 STREET ADDRESS	259 E. Joel Blvd.	
CITY-ST-ZIP	LEHIGH FL	14 CITY-ST-ZIP	Lehigh, FL 33936	
TITLE	SD	21 TITLE	Secretary D	☒ Change ☐ Addition
NAME	GILLESPIE, PHYLLIS	22 NAME	Maxine McHan	
STREET ADDRESS	401 IDA AVENUE	23 STREET ADDRESS	259 E. Joel Blvd.	
CITY-ST-ZIP	LEHIGH FL	24 CITY-ST-ZIP	Lehigh, FL 33936	
TITLE	TD	31 TITLE	Treasurer D	☒ Change ☐ Addition
NAME	THREM, RICAHRD	32 NAME	Anthony Paldino	
STREET ADDRESS	401 IDA AVENUE	33 STREET ADDRESS	259 E. Joel Blvd.	
CITY-ST-ZIP	LEHIGH VL	34 CITY-ST-ZIP	Lehigh, FL 33936	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Curtis K. Allen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0017847