

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Sep 08, 2004 8:00 am
Secretary of State

09-08-2004 90112 024 ****70.00

DOCUMENT # 717402

1. Entity Name

GLENDAL TERRACE CONDOMINIUM, INC.



Principal Place of Business

589 GLENDALE TERRACE
LEHIGH ACRES FL 33936
US

Mailing Address

12065 METRO PKWY
#201
FT MYERS FL 33912

54071677



MOORE

CR2E037 (4/04)

2. Principal Place of Business

591 Glendale Av

3. Mailing Address

591 Glendale Av.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Lehigh Acres, Fl.

City & State

Lehigh Acres, Fl.

4. FEI Number

59-1380996

Applied For

Not Applicable

Zip

33972

Country

USA

Zip

33972

Country

USA

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SPS INC.
12065 METRO PKWY.
#201
FT MYERS FL 33912

7. Name and Address of New Registered Agent

Name

Maxine McHan

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

591 Glendale Av.

City

Lehigh Acres

FL

Zip Code

33972

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

Maxine McHan, president

9-1-04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By September 8, 2004

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
SEVERANCE, KIMBERLY
589 GLENDALE TERRACE
LEHIGH ACRES FL 33972 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BOHLEY, CARROL
587 GLENDALE TERRACE
LEHIGH ACRES FL ~~33936~~ 33972 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
McHan, MAXINE
591 GLENDALE TERRACE
LEHIGH ACRES FL ~~33936~~ 33972 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Severance, Kimberly
589 Glendale Terrace
Lehigh Acres, Fl. 33972 ☐ Change ☐ Addition
Vice President

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Bohley, Carrol
587 Glendale Terrace
Lehigh Acres, Fl. 33972 ☒ Change ☐ Addition
Secretary

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
McHan, Maxine
591 Glendale Av.
Lehigh Acres, Fl. 33972 ☒ Change ☐ Addition
President

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Maxine McHan

9-1-04

239-369-7072

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #