

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

FILED
Mar 09, 2004 8:00 am
Secretary of State

03-09-2004 90052 039 ****61.25

DOCUMENT # 732878

1. Entity Name

TERRA TRANQUILA IMPROVEMENT ASSOCIATION, INC



Principal Place of Business

P. O. BOX 27-2984
BOCA RATON FL 33429

Mailing Address

P. O. BOX 27-2984
BOCA RATON FL 33429

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



MOORE CR2E037 (11/03)

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

LEWIS, FRANK
6812 CALLE DEL PAZ NORTH
BOCA RATON FL 33433

7. Name and Address of New Registered Agent

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 required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 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 D ☐ Delete
NAME WESTERGERG, MELLIE
STREET ADDRESS 6944 CALLE DEL PAZ WEST
CITY-ST-ZIP BOCA RATON FL 33433

TITLE D ☐ Delete
NAME STARK, JACOB
STREET ADDRESS 6800 CALLE DEL PAZ WEST
CITY-ST-ZIP BOCA RATON FL 33433

TITLE V ☒ Delete
NAME CARTONA, JOHN
STREET ADDRESS 6915 CALLE DEL PAZ N
CITY-ST-ZIP BOCA RATON FL 33433

TITLE D ☐ Delete
NAME PATTERSON, HELEN
STREET ADDRESS 6837 CALLE DEL PAZ SOUTH
CITY-ST-ZIP BOCA RATON FL 33433

TITLE P ☒ Delete
NAME PLOSKI, EDWARD
STREET ADDRESS 6928 CALLE DEL PAZ S
CITY-ST-ZIP BOCA RATON FL 33433

TITLE D ☐ Delete
NAME LEWIS, FRANK
STREET ADDRESS 6812 CALLE DEL PAZ N
CITY-ST-ZIP BOCA RATON FL

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE **PRESIDENT** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **V** ☐ Change ☒ Addition
NAME **MCKEE OWEN**
STREET ADDRESS **6915 CALLE DEL PAZ N**
CITY-ST-ZIP **BOCA RATON FL 33433**

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

TITLE ☐ Change ☒ Addition
NAME **TIDMORE TODD**
STREET ADDRESS **6912 CALLE DEL PAZ NORTH**
CITY-ST-ZIP **BOCA RATON FL 33433**

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 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: *Frank R Lewis* **FRANK LEWIS**

3/6/04

561-391-1514

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #