

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739899

FILED  
Mar 18, 2010  
Secretary of State

**Entity Name:** PALM TERRACE ASSOCIATION OF ORLANDO, FLORIDA, INC.

**Current Principal Place of Business:**

2420 READING DR.  
ORLANDO, FL 32804 US

**New Principal Place of Business:**

**Current Mailing Address:**

2420 READING DR.  
ORLANDO, FL 32804 US

**New Mailing Address:**

**FEI Number:** 59-2953408

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

POLLEY, LYNNE  
2420 READING DR.  
ORLANDO, FL 32804 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: P  
Name: RUFFIER, BILL  
Address: 2404 READING DR  
City-St-Zip: ORLANDO, FL 32804

Title: S  
Name: HIGHTOWER, GEORGIA  
Address: 1154 WESTERN WAY  
City-St-Zip: ORLANDO, FL 32804

Title: T  
Name: CRIMMINGS, VIRGINIA  
Address: 1022 BRYN MAWR ST  
City-St-Zip: ORLANDO, FL 32804

Title: D  
Name: CRIMMINGS, CRAIG  
Address: 1022 BRYN MAWR ST  
City-St-Zip: ORLANDO, FL 32804

Title: V  
Name: POLLEY, LYNNE  
Address: 2420 READING DRIVE  
City-St-Zip: ORLANDO, FL 32804

Title: D  
Name: HAWKINS, HEATHER  
Address: 1023 EASTERN WAY  
City-St-Zip: ORLANDO, FL 32804

I hereby 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 all other like empowered.

SIGNATURE: CRAIG CRIMMINGS

D

03/18/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date