

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744484

FILED
Apr 15, 2010
Secretary of State

Entity Name: TERRACE PARK OF FIVE TOWNS, NO. 14, INC. A CONDOMINIUM

Current Principal Place of Business:

4585 140 AVE NORTH
SUITE 1012
CLEARWATER, FL 33762

New Principal Place of Business:

4585 140 AVENUE N
SUITE 1012
CLEARWATER, FL 33762

Current Mailing Address:

4585 140 AVE NORTH
SUITE 1012
CLEARWATER, FL 33762

New Mailing Address:

4585 140 AVENUE N
SUITE 1012
CLEARWATER, FL 33762

FEI Number: 59-1972828

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT CONCEPTS, INC
4585 140TH AVE NORTH
SUITE 1012
CLEARWATER, FL 33762 US

Name and Address of New Registered Agent:

COMMUNITY MANAGEMENT CONCEPTS, INC
4585 140TH AVENUE N
SUITE 1012
CLEARWATER, FL 33762 US

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: KIRK BLISS

04/15/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: SHARP, EMILY
Address: 5969 TERRACE PARK DR #301
City-St-Zip: ST PETERSBURG, FL 33709

Title: D
Name: JOHNSON, MARGO
Address: 5969 TERRACE PARK DR #110
City-St-Zip: ST PETERSBURG, FL 33709

Title: S
Name: LINDEMAN, BETTY
Address: 5969 TERRACE PARK DR #305
City-St-Zip: ST PETERSBURG, FL 33770

Title: VP/T
Name: LAMBERT, MAY
Address: 5969 TERRACE PARK DR #303
City-St-Zip: ST PETERSBURG, FL 33709

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: LINDA PISANO

MGR

04/15/2010

Electronic Signature of Signing Officer or Director

Date