2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT #745416 01-22-2007 90083 026 ****61.25 TERRACES OF FOREST LAKES CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 40003501 6146 CLARK CENTER AVE 6146 CLARK CENTER AVE SARASOTA, FL 34238 SUITE A SARASOTA, FL 34238 2. Principal Place of Business - No P.O. Box # 2848 Proctor Road 3. Mailing Address 2848 Proctor Road Suite, Apt. #, etc. Suite, Ant. #, etc. 01152007 Chq-NP CR2E037 (12/06) Applied For 4. FEI Number 59-2113083 City & State City & State Sarasota, FL Sarasota, Not Applicable Country USA Country USA Zip \$8.75 Additional 5. Certificate of Status Desired 34231 34231 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent <u>Miller Management Services, Inc</u> MANAGEMENT CONCEPTS OF SARASOTA COUNTY INC Street Address (P.O. Box Number is Not Acceptable) 6146 CLARK CENTER AVE 2848 Proctor Road SARASOTA, FL 34238 City Sarasota, 34231 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 (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Trust Fund Contribution Due by May 1, 2007 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS PD ☐ Addition TITLE Delete TITLE ☐ Chance NAME BALDWIN, ROBERT NAME STREET ADDRESS 2227 BENEVA TERRACE STREET ADDRESS SARASOTA, FL CITY-ST-21P CITY-ST-ZIP νD TITLE ☐ Defete TITLE Change ☐ Addition NOHEIMER, PHIL NAME NAME STREET ADDRESS 2213 BENEVA TERRACE STREET ADDRESS CITY-ST-ZIP SARASOTA, FL City-St-ZiP SD D **Change** TITLE ☐ Delete TITLE Addition PERNA, ALBERT NAME NAME STREET ADDRESS 2317 BENEVA TERRACE STREET ADDRESS CITY-ST-ZIP SARASOTA, FL CITY-ST-ZIP Delete TITLE TITLE Charige Addition NAME EBU, DON ETOLL, DON NAME 2365 Beneva Terrace STREET ADDRESS 2365 BENEVA TERRACE STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 342323637 34232 City-St-ZiP Sarasota, FL Delete TITLE ☐ Addition Charre STD OWEN, ANNABELLE NAME NAME STREET ADDRESS 2211 BENEVA TERRACE STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 342323637 CITY-ST-ZIP TIFLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST- 7IP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 tike empowered.

Annabelle Owen,

Secretary

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGN

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FILED

Jan 22, 2007 8:00 am