

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749561

FILED
Feb 02, 2010
Secretary of State

Entity Name: TERRACE PARK OF FIVE TOWNS, NO. 19, INC.

Current Principal Place of Business:

5970-80TH ST NORTH
403
SAINT PETERSBURG, FL 33709 US

New Principal Place of Business:

Current Mailing Address:

5970-80TH ST NORTH
403
SAINT PETERSBURG, FL 33709 US

New Mailing Address:

FEI Number: 59-2142863 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PAUL GILJE
5970 80TH ST. NORTH
#403
SAINT PETERSBURG, FL 33709 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: ST
Name: ANDERSEN, EDITH MRS.
Address: 5970 80TH ST N #406
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: PD
Name: GILJE, PAUL MR.
Address: 5970 80TH ST. N. #403
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: VPD
Name: ADAMS, ANN MRS.
Address: 5970 80TH ST. N. #314
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: TRD
Name: FEHLAND, DAVID MR.
Address: 5970 80TH ST. N. #104
City-St-Zip: ST. PETERSBURG, FL 33709 US

Title: D
Name: CHISM, BERNARD MR.
Address: 5970 80TH ST. N. #401
City-St-Zip: ST. PETERSBURG, FL 33709 US

Title: D
Name: HOLLISTER, JOSEPH MR.
Address: 5970 80TH ST. N.#305
City-St-Zip: ST. PETERSBURG, FL 33709 US

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: PAUL GILJE

PD

02/02/2010

Electronic Signature of Signing Officer or Director

Date