2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2008
Secretary of State

DOCUMENT# 762098

Entity Name: TERRACE PARK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3205 ADWOOD ROAD
TALLAHASSEE, FL 32312 US

New Principal Place of Business:

Current Mailing Address:

3205 ADWOOD ROAD
TALLAHASSEE, FL 32312 US

New Mailing Address:

FEI Number: 59-2551021 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WOOL, ROBERT M
3205 ADWOOD ROAD
TALLAHASSEE, FL 32312 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: PRES ( ) Delete
Name: SLADE, MARSHA
Address: 1340 TERRACE STREET
City-St-Zip: TALLAHASSEE, FL 32303

Title: VP ( ) Delete
Name: DALEEN, PAUL H
Address: 815 ELIZABETH DR.
City-St-Zip: TALLAHASSEE, FL 32303

Title: S ( ) Delete
Name: OWENBY, JR, ERMINE M
Address: 817 ELIZABETH DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: T ( ) Delete
Name: WOOL, ROBERT
Address: 3205 ADWOOD ROAD
City-St-Zip: TALLAHASSEE, FL 32303

Title: D ( ) Delete
Name: CROY, CAMILLA D
Address: 801 JAMESTOWN COURT
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ROBERT M. WOOL, TREASURER T 01/20/2008
Electronic Signature of Signing Officer or Director Date