

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765926

FILED
Mar 07, 2007
Secretary of State

Entity Name: TERRACE PALMS CONDOMINIUM, INC.

Current Principal Place of Business:

VANGUARD MANAGEMENT
9300 N 16 ST
TAMPA, FL 33612

New Principal Place of Business:

Current Mailing Address:

VANGUARD MANAGEMENT
9300 N 16 ST
TAMPA, FL 33612 US

New Mailing Address:

FEI Number: 59-2313952 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINFIELD, JANET
9300 N 16 ST
TAMPA, FL 33612 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: PD () Delete
Name: STARCHER, MIKE
Address: 11801 N. 50 ST., E-13
City-St-Zip: TAMPA, FL 33617

Title: VP () Delete
Name: HAGN, GEORGE
Address: 11801 50 ST. L-21
City-St-Zip: TAMPA, FL 33617

Title: SD () Delete
Name: PEREIRA, ISABEL
Address: 11801 N 50TH ST C-13
City-St-Zip: TAMPA, FL 33617

Title: TD (X) Delete
Name: OLEY, CARL
Address: 11801 N 50TH ST -13
City-St-Zip: TAMPA, FL 33617

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: HAHN, GEORGE
Address: P.O. BOX 291623
City-St-Zip: TAMPA, FL 33687

Title: SD (X) Change () Addition
Name: ROOT, JIM
Address: 11801 N. 50TH ST. J-22
City-St-Zip: TAMPA, FL 33617

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JANET WINFIELD

AGEN

03/07/2007

Electronic Signature of Signing Officer or Director

_____ Date