

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-07-2003 90179 038 ****61.25

DOCUMENT # 765926

1. Entity Name

TERRACE PALMS CONDOMINIUM, INC.



Principal Place of Business

VANGUARD MANAGEMENT
9300 N 16 ST
TAMPA FL 33612

Mailing Address

VANGUARD MANAGEMENT
9300 N 16 ST
TAMPA FL 33612
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2313952**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MOYER, BOB
9300 N 16 ST
TAMPA FL 33612

Name **WINEFIELD, JANET**

Street Address (P.O. Box Number is Not Acceptable)

9300 N. 16 ST.

City **TAMPA**

FL

Zip Code **33612**

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

Janet Winefield

JANET WINEFIELD

3-28-03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE **PD**
NAME **STARTRER, MIKE**
STREET ADDRESS **11801 N. 50TH ST.**
CITY-ST-ZIP **TAMPA FL 33617**

TITLE **DV**
NAME **ROGERS, TERRENCE**
STREET ADDRESS **11801 N. 50TH ST., K-11**
CITY-ST-ZIP **TAMPA FL 33617**

TITLE **D**
NAME **HOLTSBERG, TIFFINI**
STREET ADDRESS **11801 N. 50TH ST. G-25**
CITY-ST-ZIP **TAMPA FL 33617**

TITLE **SD**
NAME **ROOT, JAMES**
STREET ADDRESS **11801 N. 50TH ST. J-22**
CITY-ST-ZIP **TAMPA FL 33617**

TITLE **TD**
NAME **HALL, ROBERT**
STREET ADDRESS **5429 STORM RD**
CITY-ST-ZIP **LUTZ FL 33558**

TITLE **A**
NAME **MOYER, BOB**
STREET ADDRESS **9300 N 16 ST**
CITY-ST-ZIP **TAMPA FL 33612**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D**
NAME **STARTRER, MIKE**
STREET ADDRESS **11801 N. 50th St, E-13**
CITY-ST-ZIP **TAMPA, FL 33617**

TITLE **T/D**
NAME **AKBAR, KARRIEMA**
STREET ADDRESS **11801 N. 50th St, B-12**
CITY-ST-ZIP **TAMPA, FL 33617**

TITLE **PD**
NAME **WAHEED, AISHA**
STREET ADDRESS **11801 N. 50th St, F-24**
CITY-ST-ZIP **TAMPA, FL 33617**

TITLE **S/D**
NAME **HAHN, GEORGE**
STREET ADDRESS **11801 N. 50th St, L-21**
CITY-ST-ZIP **TAMPA, FL 33617**

TITLE **D**
NAME **MC DONALD, CHRIS**
STREET ADDRESS **11801 N. 50th St, G-11**
CITY-ST-ZIP **TAMPA, FL 33617**

TITLE **AGENT**
NAME **WINEFIELD, JANET**
STREET ADDRESS **9300 N. 16 STREET**
CITY-ST-ZIP **TAMPA, FL 33612**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 817, 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 like empowered.

SIGNATURE:

Janet Winefield

JANET WINEFIELD

3-28-03

930-8036

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)