

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -2 AM 8:32

DOCUMENT # 765930 (3)

1. Corporation Name

TERRACE PARK OF FIVE TOWNS NO. 25, INC.

Principal Place of Business

Mailing Address

6188 80 ST N
ST. PETERSBURG FL 33709

6188 80 ST N
6188 80TH ST. N.
ST. PETERSBURG FL 33709
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/02/1982
3a. Date of Last Report 02/16/1994
4. FEI Number 59-2451022
Applied For Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 6188 80th St. North

26 6188 80th St. North

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Apt. 308

27 Apt. 308

City & State

City & State

23 S T. Petersburg, Fl.

28 ST. Petersburg, Fl.

Zip

Country

Zip

Country

24 33709

25 Pinellas

29 33709

30 Pinellas

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEE, ANNA B
6188 80TH ST NO #311
ST. PETERSBURG FL 33709

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Anna B. Lee

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when transferring)

DATE

1-25-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME CLARK, JOSEPH M
STREET ADDRESS 6188 80TH ST NO #304
CITY-ST-ZIP ST. PETERSBURG FL

1.1 TITLE PD
1.2 NAME MEIER, JOHN H.
1.3 STREET ADDRESS 6188 80th St. North Apt. 308
1.4 CITY-ST-ZIP St. Petersburg, Fla. 33709
XX Change ☐ Addition

TITLE VP
NAME BITTINGER, LAMBERT G
STREET ADDRESS 6188 80TH ST NO #307
CITY-ST-ZIP ST. PETERSBURG FL

2.1 TITLE VP
2.2 NAME CLARK, JOSEPH M.
2.3 STREET ADDRESS 6188 80th St. North Apt. 304
2.4 CITY-ST-ZIP St. Petersburg, Fl. 33709
XX Change ☐ Addition

TITLE TD
NAME MEIER, JOHN H
STREET ADDRESS 6188 80TH ST NO #307
CITY-ST-ZIP ST. PETERSBURG FL

3.1 TITLE TD
3.2 NAME FIELD, FREDERICK
3.3 STREET ADDRESS 6188 80th St. North Apt. 406
3.4 CITY-ST-ZIP St. Petersburg, Fla. 33709
☐ Change XX Addition

TITLE SD
NAME LEE, ANNA B
STREET ADDRESS 6188 80TH NO #311
CITY-ST-ZIP ST PETERSBURG FL

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE D
NAME HYATT, FRANK
STREET ADDRESS 6188 80TH ST NO #407
CITY-ST-ZIP ST. PETERSBURG FL

5.1 TITLE D
5.2 NAME BITTINGER, LAMBERT G
5.3 STREET ADDRESS 6188 80th St. N. Apt. 307
5.4 CITY-ST-ZIP St. Petersburg, Fla. 33709
XX Change ☐ Addition

TITLE D
NAME SELIGMAN, EDWARD L
STREET ADDRESS 6188 80TH ST NO #404
CITY-ST-ZIP ST PETERSBURG FL

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: JOHN H. MEIER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John H. Meier 1-25-95 541-3008
(813)