2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 12, 2008 8:00 am
Secretary of State
06-12-2008 90001 030 ****61.25

DOCUMENT # 765930

1. Entity Name
TERRACE PARK OF FIVE TOWNS NO. 25, INC.

60044371

Principal Place of Business	Mailing Address
6188 80TH STREET NORTH ST. PETERSBURG, FL 33709 US	~~7300 PARK STREET~~ ~~SEMINOLE, FL 33777~~ US

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Florida Community Property Management 8141 54th Avenue N
City & State	City & State: St Petersburg, FL 33709
Zip / Country	Zip / Country

05222008 Chg-NP CR2E037 (12/06)

4. FEI Number 59-2451022 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~CO/ RESOURCE PROPERTY~~ MANAGEMENT ~~7300 PARK STREET~~ ~~SEMINOLE, FL 33777~~	Name: Florida Community Property Management Street Address (P.O. Box Number is Not Acceptable): 8141 54th Avenue N St Petersburg, FL 33709 City: FL Zip Code

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: Robert J. Kresnik As Registered Agent 5-29-08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by September 12, 2008

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P PERRY, BOB 6188 80TH STREET NORTH #301 ST PETERSBURG, FL 33709	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP FARNHAM, DEXTER 6188 80TH STREET NORTH #411 ST PETERSBURG, FL 33709	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S FITZPATRICK, LUCILLE 6188 80TH STREET NORTH #411 ST PETERSBURG, FL 33709	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MOONEY, EDWARD 6188 80TH STREET NORTH # 207 ST PETERSBURG, FL 33709	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Shirley Gebler 6618 80TH st North # 305 St. Petersburg, Fl 33709	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DOWD, PAT 6188 80TH STREET NORTH #110 ST PETERSBURG, FL 33709	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Ed Mooney 6618 80TH st. North # 207 St. Petersburg, Fl 33709	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SMITH, HAROLD 6188 80TH STREET NORTH #111 ST PETERSBURG, FL 33709	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: x [signature] x Robert A. Peeon 6/9/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #