2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#765930

FILED Jan 19, 2010 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

6188 80TH STREET NORTH ST. PETERSBURG, FL 33709 US

Current Mailing Address: New Mailing Address:

8141 54TH AVENUE N

SAINT PETERSBURG, FL 33709 US

FEI Number: 59-2451022 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FLORIDA COMMUNITY PROPERTY MGME.LLC AAMC 8141 54TH AVENUE N

SAINT PETERSBURG, FL 33709 US

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: F

Name: PERRY, BOB

Address: 6188 80TH STREET NORTH #301 City-St-Zip: ST PETERSBURG, FL 33709 US

Title: VP

Name: FARNHAM, DEXTER

Address: 6188 80TH STREET NORTH #411 City-St-Zip: ST PETERSBURG, FL 33709 US

Title: S

Name: FITZPATRICK, LUCILLE
Address: 6188 80TH STREET NORTH #411
City-St-Zip: ST PETERSBURG, FL 33709 US

Title: D

Name: GEBLER, SHIRLEY
Address: 6618 80TH ST NORTH #305

City-St-Zip: SAINT PETERSBURG, FL 33709 US

Title: [

Name: MOONEY, ED

Address: 6618 80TH ST NORTH #305 City-St-Zip: SAINT PETERSBURG, FL 33709 US

Title:

Name: SMITH, HAROLD

Address: 6188 80TH STREET NORTH #111
City-St-Zip: ST PETERSBURG, FL 33709 US

I hereby 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 all other like empowered.

SIGNATURE: BOB PERRY PRES 01/19/2010