

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

FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90351 025 ****61.25

DOCUMENT # 765930

1. Entity Name

TERRACE PARK OF FIVE TOWNS NO. 25, INC.



Principal Place of Business

**6188 80TH ST. NORTH
APT - 308
ST. PETERSBURG FL 33709
US**

Mailing Address

**8141 - 54TH AVENUE N
ST. PETERSBURG FL 33709
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 **59-2451022**

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

**FOLEY, SEAN
8141 54TH AVENUE N
SAINT PETERSBURG FL 33709**

Name

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

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

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SMITH, CRESS 6188 80TH STREET N. #107 ST. PETERSBURG FL 33709	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. Fritzie Glanzrock 6188 80th St. N. #101 St. Pete, FL 33709	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MATHEWS, ALICE 6188 80TH STREET N. #105 ST. PETERSBURG FL 33709	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V. P. Betty Seligman 6188 80th St. N. #404 St. Pete, FL 33709	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, HAROLD 6188 80TH STREET N #107 ST PETERSBURG FL 33709	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. Bob Perry 6188 80th St. N. #301 St. Pete, FL 33709	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BITTINGER, LAMBERT 6188 80TH STREET N #307 SAINT PETERSBURG FL 33709	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. Joan Owen 6188 80th St. N. #107 St. Pete, FL 33709	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MOONEY, ED 6188 80TH STREET N. #207 ST. PETERSBURG FL 33709	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T EDEN, LILLIAN 6188 80TH STREET N. #209 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 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 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:

Signature

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-03 (227) 546-2211

Date

Daytime Phone #

CR2E037 (10/02)