2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2009
Secretary of State

DOCUMENT# N00000005409

Entity Name: TERRACE XII AT LAKESIDE GREENS ASSOCIATION, INC.

Current Principal Place of Business:

12734 KENWOOD LN., STE 49
FORT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

12764 KENWOOD LANE
SUITE 49
FT. MYERS, FL 33907

New Mailing Address:

12734 KENWOOD LN., STE 49
FORT MYERS, FL 33907

FEI Number: 65-1039021 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TROPICAL ISLES MANAGEMENT
12734 KENWOOD LN., STE 49
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

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: STD ( ) Delete
Name: PATALINO, JOE
Address: 10470 WASHINGTON PALM WAY, #1226
City-St-Zip: FORT MYERS, FL 33966

Title: VP ( ) Delete
Name: JOHNSON, TIMOTHY
Address: 10470 WASHINGTON PALM WAY 1242
City-St-Zip: FORT MYERS, FL 33966

Title: STD ( ) Delete
Name: MAISANO, VINCE
Address: 10470 WASHINGTON PALM WAY 1216
City-St-Zip: FT MYERS, FL 33966

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: PATALINO, JOE
Address: 10470 WASHINGTON PALM WAY, #1226
City-St-Zip: FORT MYERS, FL 33966

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JOE PATALINO P 03/20/2009

Electronic Signature of Signing Officer or Director — Date