

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006701

FILED  
Aug 31, 2009  
Secretary of State

**Entity Name:** TERRACE PARK CIVIC ASSOCIATION, INC.

**Current Principal Place of Business:**

P O BOX 291341  
TAMPA, FL 336871341

**New Principal Place of Business:**

4207 E RICHMERE ST  
TAMPA, FL 33617

**Current Mailing Address:**

P O BOX 291341  
TAMPA, FL 336871341

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

DEROCHE, KARL  
4207 E RICHMERE ST  
TAMPA, FL 33617 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: PD ( ) Delete  
Name: DEROCHE, KARL  
Address: 4207 E RICHMERE ST  
City-St-Zip: TAMPA, FL 33617

Title: VD ( ) Delete  
Name: WALTERS, BILL  
Address: 5117 E 97TH AVE  
City-St-Zip: TAMPA, FL 33617

Title: S ( ) Delete  
Name: MONTELIONE, LISA  
Address: 9814 N PAWNEE AVE  
City-St-Zip: TAMPA, FL 33617

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VD (X) Change ( ) Addition  
Name: SUTTON, ROBERT  
Address: 9812 N PAWNEE AVE  
City-St-Zip: TAMPA, FL 33617

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: KARL DEROCHE

D

08/31/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date