2008 NOT-FOR-PROFIT CORPORATION

May 19, 2008 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # N02000002045** 05-19-2008 90037 043 ****61.25 TERRA NOVA CLUB, INC. Principal Place of Business Mailing Address 3458 MORRIS ST NO 5501 28TH ST N #10 ST PETERSBURG, FL 3371# 3 ST PETERSBURG, FL 33714 2. Principal Place of Business - No P.O. Box # 3. Mailing Address SAME AS 04212008 CR2E037 (12/06) Chg-NP Applied For City & State 02-0626208 Not Applicable Zin Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BERMAN. JANET. L. 1804 54TH STREET NORTH MonRIS ST PETERSBURG, FL 33710 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 (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Make check payable to Filing Fee is \$61.25 Trust Fund Contribution. Florida Department of State **Due by May 1, 2008** Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Delete TITLE TITLE Change ☐ Addition COFFMAN, LISA NAME NAME 5501 28TH STREET NORTH #10 STREET ADDRESS STREET ADDRESS ST PETERSBURG, FL 33714 City-St-ZIP CITY-ST-ZIP DT TITLE ☐ Delete TITLE ■ Addition BEAUCHESNE, DANIEL A NAME 225 65 51.1 STREET ADDRESS 2634 40 AVE N STREET ADDRESS CITY-ST-ZIP **ST PETE, FL 33714** CITY-ST-ZIP PAST PRESIDEN TITLE Delete TTTE ☐ Addition NAME BERMAN, JANET L NAME 1804 54TH STREET NORTH STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ST PETERSBURG, FL 33710 CITY-ST-ZIP President TITLE ☐ Delete MLE ■ Addition Travelle NAME NAME 82 WAY N STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TOTALE ☐ Delete TITLE ☐ Chance Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP C174-S1-71P MLE Delete IIILE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

FILED