
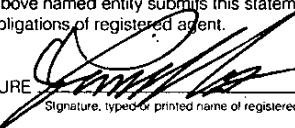
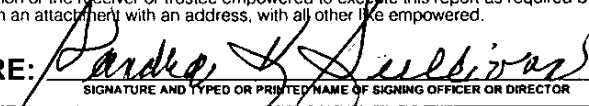


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2008 8:00 am
Secretary of State

05-05-2008 90256 013 ****61.25

DOCUMENT # N03464 1. Entity Name TERRACE PARK OF FIVE TOWNS NO. 29, INC.					
Principal Place of Business 8174 TERRACE GARDEN DRIVE NORTH ST. PETERSBURG, FL 33709 US			Mailing Address 7300 PARK STREET SEMINOLE, FL 33777 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
					
04192008 Chg-NP CR2E037 (12/06)					
4. FEI Number 59-2894958				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent CO/ RESOURCE PROPERTY MANAGEMENT 7300 PARK STREET SEMINOLE, FL 33777			7. Name and Address of New Registered Agent Name RANDY MOODY Street Address (P.O. Box Number is Not Acceptable) 6157 31ST AVENUE NORTH City ST. PETERSBURG FL Zip Code 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  DATE 04-19-2008 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	P SULLIVAN, SANDRA 8174 TERRACE GARDEN DR. N. #401 ST PETERSBURG, FL 33709 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GUTIERREZ, MARCY 8174 TERRACE GARDEN DR. N. #411 ST PETERSBURG, FL 33709 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT PAYMAK, JOAN 8174 TERRACE GARDEN DR. N. #305 ST. PETERSBURG, FL 33709 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BOESE, JEAN 8174 TERRACE GARDEN DR. N. #404 ST PETERSBURG, FL 33709 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KEISTLER, BETTY 8174 TERRACE GARDEN DR. N. #110 ST PETERSBURG, FL 33709 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OLMA, FRANCESCA 8174 TERRACE GARDEN DR. N. #407 ST PETERSBURG, FL 33709 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR MORENO, JUSTINE 8174 TERRACE GARDEN DR. N. #102 ST. PETERSBURG, FL 33709 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
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.					
SIGNATURE:  5-1-08 727-515-4653 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

SEE ADDITIONAL SHEET

**RCM PROPERTY
MANAGEMENT, INC.**

ATTACHMENT

46097364

1103464



RANDY C. MOODY
P.O. Box 47364
St. Petersburg, FL 33743
(727) 515-4653
(727) 343-6808 fax
email: Rmoody@tampabay.rr.com

Terrace Park of Five Towns, #29, Inc.

8174 Terrace Garden Drive North
St. Petersburg, FL 33709
A Corporation Not-for-Profit

2008 Annual Corporation Report (second sheet)

Director

☒ Addition

Boulanger, Doris

8174 Terrace Garden Drive North

Unit # 504

St. Petersburg, FL 33709