

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2004 08:00 AM
Secretary of State

DOCUMENT # N06071

1. Entity Name
198 TERRACE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
5350 SW 198 TERRACE
SOUTHWEST RANCHES, FL 33332 US

Mailing Address
5350 SW 198 TERRACE
SOUTHWEST RANCHES, FL 33332 US



01122004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HENNESSY, FRANCINE
5350 SW 198 TERRACE
SOUTHWEST RANCHES, FL 33332

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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 _____

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HENNESSY, JOHN
STREET ADDRESS	5350 SW 198 TERRACE
CITY-ST-ZIP	SOUTHWEST RANCHES, FL 33332
TITLE	D
NAME	LUCK, MARILYN
STREET ADDRESS	4921 SW 198TH TERRACE
CITY-ST-ZIP	FORT LAUDERDALE, FL 33332
TITLE	PD
NAME	HENNESSY, FRANCINE
STREET ADDRESS	5350 SW 198 TERRACE
CITY-ST-ZIP	FORT LAUDERDALE, FL 33332
TITLE	TD
NAME	THOMPSON, CARMEN
STREET ADDRESS	5900 SW 198 TERRACE
CITY-ST-ZIP	SOUTHWEST RANCHES, FL 33332
TITLE	SD
NAME	MAUZY, NORA
STREET ADDRESS	5210 S 198 TERRACE
CITY-ST-ZIP	SOUTHWEST RANCHES, FL 33332
TITLE	D
NAME	VANIK, JOHN
STREET ADDRESS	5300 SW 198 TERRACE
CITY-ST-ZIP	SOUTHWEST RANCHES, FL 33332

01/22/04-80003-016 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Carmen L. Thompson (Carmen L. Thompson/TD) 1/14/04 305579-0500
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #