

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000011487

**FILED**  
**Feb 23, 2009**  
**Secretary of State**

**Entity Name:** THE TERRACE CONDOMINIUM OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

945 MICHIGAN AVENUE  
MANAGEMENT OFFICE  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

945 MICHIGAN AVENUE  
MANAGEMENT OFFICE  
MIAMI BEACH, FL 33139 US

**Current Mailing Address:**

945 MICHIGAN AVENUE  
MANAGEMENT OFFICE  
MIAMI BEACH, FL 33139

**New Mailing Address:**

10796 PINES BLVD  
SUITE 204  
PEMBROKE PINES, FL 33026 US

**FEI Number:** 26-2729205      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **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:**

WASERSTEIN, RICHARD  
1124 KANE CONCOURSE  
BAY HARBOR ISLANDS, FL 33154 US

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

MOYAL, PATRICK  
10796 PINES BLVD  
SUITE 204  
PEMBROKE PINES, FL 33026 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: PATRICK MOYAL

02/23/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: P ( ) Change (X) Addition  
Name: LACHAMP, MONIQUE  
Address: 35 BIS RUE DU DOCTOR MARCON  
City-St-Zip: BANDOL, FR 83150 FR

Title: ST ( ) Change (X) Addition  
Name: BARKSDALE, ELLIOTT  
Address: 1203 F STREET NE  
City-St-Zip: WASHINGTON, DC 20002 US

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: MONIQUE LACHAMP

P

02/23/2009

Electronic Signature of Signing Officer or Director

Date