2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Mar 11, 2008 8:00 am Secretary of State DOCUMENT # N07998 1. Entity Name 03-11-2008 90017 040 ****61.25 TERRACE PARK ESTATES HOMEOWNERS ASSOCIATION. INCORPORATED Principal Place of Business Mailing Address 33741 TERRACE BLVD. ZEPHYRHILLS FL 33543 33741 TERRACE BLVD. ZEPHYRHILLS FL 33543 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #. etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State 4. FEI Number Applied For 59-2797207 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MARNELL, MARLENE Street Address (P.O. Box Number is Not Acceptable) 3903 CHRIS DR ZEPHYRHILLS FL 33543 Zip Code 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. Manuel M. MRLENE MARNEL FILE NOW: FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due By May 1, 2008 Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE Addition HUTCHENS, SHIRLEY NAME NAME STREET ADDRESS 3914 KIN DR STREET ADDRESS CITY-ST-ZIP ZEPHYRHILLS FL 33543 CITY-ST-ZIP VP TITLE TITLE Change Change Addition Delate LAMSON, LEO NAME NAME BARBER, BARBARA 3909 CHRIS DR STREET ADDRESS STREET ADDRESS 3907 SARAH CITY-ST-ZIP ZEPHYRHILLS FL 33543 CITY-ST-ZIP WHYR NILLS. TOTLE Delete Addition MARNELL, MARLENE NAME STREET ADDRESS 3903 CHRIS DR STREET ADDRESS ZEPHYRHILLS FL 33543 CITY-ST-ZIP CITY-ST-7IP Delete TITLE TITLE Change ☐ Addition EVERS, DEANNA NAME NAME SYLVESTER GLORIA 3926 KIM DR STREET ADDRESS STREET ADDRESS 3901 SARAH DR ZEPHYRHILLS FL 33543 CITY-ST-ZIP CITY-ST-ZIP phya4,115 FL 33543 Delete X Change ☐ Addition TITLE TITLE LEES, RON RON, HARRY MAME NAME 3846 JULIE DR STREET ADDRESS 3927 5ARAH STREET ADDRESS ZEPHYRHILLS FL 33543 CITY-ST-ZIP CITY-ST-ZIP IIILE TITLE ☐ Delete ☐ Change Addition WAASWORTH, KEITH NAME 2815 SAHAR DR STREET ADDRESS STREET ADDRESS ZEPHYRHILLS FL 33543 CITY-ST-ZIP CHTY-ST-ZIP

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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. MARLENE MARNELL 2/28/08 SIGNATURE: ハンハル -Marners

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information