

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08601

FILED
Apr 05, 2009
Secretary of State

Entity Name: TAYLOR TERRACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1980 N ATLANTIC AVE
#701
COCOA BEACH, FL 32931 US

New Principal Place of Business:

Current Mailing Address:

1980 NORTH ATLANTIC AVENUE
#701
COCOA BEACH, FL 32931

New Mailing Address:

FEI Number: 59-2817881 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, PETEY
1980 NORTH ATLANTIC AVENUE
#701
COCOA BEACH, FL 32931 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DENNY, JOAN
Address: 507 TAYLOR AVE
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: STD () Delete
Name: CHASTANG, HARRIET
Address: 509 TAYLOR AVE
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D () Delete
Name: SHORE, MARILYN
Address: 513 TAYLOR AVE
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: PD () Delete
Name: PENTEOFF, SUZANNE
Address: 515 TAYLOR AVE
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: V () Delete
Name: BUHTZ, DENNIS
Address: 535 TAYLOR AVE
City-St-Zip: CAPE CANAVERAL, FL 32920

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: SHORE, JAMES
Address: 513 TAYLOR AVE
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SUZANNE PENTICOFF

P

04/05/2009

Electronic Signature of Signing Officer or Director

Date