

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

05-05-2003 91391 044 \*\*\*\*61.25

0090192

**DOCUMENT # N40570**

1. Entity Name

**TERRACE BUILDING CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business

1852 40TH TER SW  
NAPLES FL 33909-6016

Mailing Address

P.O. BOX 990249  
NAPLES FL 33999-6016  
US

2. Principal Place of Business

3. Mailing Address

1852 40TH TERRACE SW

Suite, Apt. #, etc.

Suite, Apt. #, etc.

UNIT E

City & State

NAPLES FLA

Zip

34116

Country

Zip

34116

Country

4. FEI Number 65-0245973

Applied For

Not Applicable

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

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

FAULS, TIM  
3601 25TH AVE SW  
NAPLES FL 33964

7. Name and Address of New Registered Agent

Name BOB ROMEO

Street Address (P.O. Box Number is Not Acceptable)

681 31ST ST NW

City

NAPLES

FL

Zip Code

34120

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-25-03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME FAULS, TIM ☒ Delete  
STREET ADDRESS 3601 25TH AVE SW  
CITY-ST-ZIP NAPLES FL

TITLE VD  
NAME MAST, BOB ☐ Delete  
STREET ADDRESS 1822 40TH TER SW  
CITY-ST-ZIP NAPLES FL

TITLE STD  
NAME LOPEZ, JUAN ☒ Delete  
STREET ADDRESS 6171 22ND AVE  
CITY-ST-ZIP NAPLES FL 33909

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D  
NAME BOB ROMEO ☐ Change ☒ Addition  
STREET ADDRESS 681 31ST ST. NW  
CITY-ST-ZIP NAPLES, FL 34120

TITLE D  
NAME LARRY LANGLEY ☐ Change ☒ Addition  
STREET ADDRESS 1882 40TH TERRACE SW  
CITY-ST-ZIP NAPLES, FL 34116

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PRESIDENT/DIRECTOR 4-25-03 (239) 348-8999

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)