2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000021631

LAKELAND, FL 33801

City-St-Zip:

Entity Name: TERRACE HOTEL CORPORATION

FILED Feb 05, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
225 E. LEN SUITE 300 LAKELANI		US				
Current M	ailing Addres	s:	New Maili	New Mailing Address:		
	OB OX 24628 AKELAND, FL 33802 US			POST OFFICE BOX 24628 LAKELAND, FL 33802 US		
FEI Number:	El Number: 74-2781058 FEI Number Applied For ()		FEI Number Not Applicable ()		Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
	MON ST) D, FL 33801 l		urpose of changing i	ts registered	office or registered agent, or both,	
	e of Florida.				omeo on regional angling or along	
SIGNATU						
	Electror	ic Signature of Registered Ager	nt		Date	
Election Car	npaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DP () HERMANS, JO 2123 PECKHAI HOUSTON, TX	Л	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	D () FARNSWORTH 1501 S. FLORI LAKELAND, FL	DA AVE	Title: Name: Address: City-St-Zip:	FARNSWORT	BOULEVARD	
Title: Name: Address: City-St-Zip:	T () BURNS, ROBE 5847 SAN FEL HOUSTON, TX	PE, STE 850	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address:	DS () ALLEN, PHILIP 225 E. LEMON		Title: Name: Address:	() Change () Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: PHILIP O. ALLEN DS 02/05/2009