

FILE NOW: FILING FEE IS \$61.25

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Apr 23 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **719189** (3)
1. Corporation Name
TURTLE CREEK VILLAGE PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business GATE HOUSE CONCOURSE DRIVE TEQUESTA FL 33469	Mailing Address GATE HOUSE CONCOURSE DRIVE TEQUESTA FL 33469
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3. Date Incorporated or Qualified 08/26/1970	
4. FEI Number 59-1822207	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	27 City & State	28 City & State
23 Zip	25 Country	29 Zip	30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WEBER, SYLVIA
168 TURTLE CREEK DR
TEQUESTA FL 33469**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D
NAME	LIERMAN, JAMES	1.2 NAME	Henry Bessette
STREET ADDRESS	76 TURTLE CREEK DR.	1.3 STREET ADDRESS	56 Turtle Creek Drive
CITY-ST-ZIP	TEQUESTA FL	1.4 CITY-ST-ZIP	Tequesta, FL 33469
TITLE	P	2.1 TITLE	D
NAME	SHAMBELAN, ROBERT	2.2 NAME	Peter Halligan
STREET ADDRESS	86 TURTLE CREEK DR.	2.3 STREET ADDRESS	34 Tortoise Lane
CITY-ST-ZIP	TEQUESTA FL	2.4 CITY-ST-ZIP	Tequesta, FL 33469
TITLE	D	3.1 TITLE	D
NAME	THORSEN, ROBERT	3.2 NAME	San Van Sickle
STREET ADDRESS	84 TURTLE CREEK DRIVE	3.3 STREET ADDRESS	109 Turtle Creek Drive
CITY-ST-ZIP	TEQUESTA FL	3.4 CITY-ST-ZIP	Tequesta, FL 33469
TITLE	T	4.1 TITLE	D
NAME	WEBER, SYLVIA	4.2 NAME	Jack Zimmer
STREET ADDRESS	168 TURTLE CREEK DR	4.3 STREET ADDRESS	152 Turtle Creek Drive
CITY-ST-ZIP	TEQUESTA FL	4.4 CITY-ST-ZIP	Tequesta, FL 33469
TITLE	D	5.1 TITLE	
NAME	ANDERSON, ROBERT E.	5.2 NAME	
STREET ADDRESS	80 TURTLE CREEK DRIVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	TEQUESTA, FL 00000	5.4 CITY-ST-ZIP	
TITLE	S	6.1 TITLE	
NAME	CICALESE, PATRICK	6.2 NAME	
STREET ADDRESS	53 TURTLE CREEK DR	6.3 STREET ADDRESS	
CITY-ST-ZIP	TEQUESTA, FL 00000	6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Sylvia R. Weber

Sylvia R. Weber

4/13/98

(561) 746-8341

CR2E037 (10/97)