2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728121

FILED Apr 28, 2005 Secretary of State

Entity Name: TURTLE LAKE GOLF COLONY CONDOMINIUM APTS., INC. NO. 1

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
180 FORES NAPLES, F	ST LAKES BL FL 34105	VD JS			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	N PROPERTY E OAK BLVD FL 34109	/MGMT JS			
FEI Number:	59-1579002	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
GUARDIAN PROPERTY MGMT 6700 LONE OAK BLVD NAPLES, FL 34109 US			ROSS, BYRON 6700 LONE OAK BL\ NAPLES, FL 34109	6700 LONE OAK BLVD	
	named entity of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATUF	RE: BYRON	ROSS		04/28/2005	
	Electro	nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	HORVAY, HEN	LAKES BLVD #101	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPD (TOPALIAN, MI 100 FOREST NAPLES, FL	LAKES BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MILLER, ANIT	LAKES BLVD, UNIT 211	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CARLSON, ED	LAKES BLVD, UNIT 311	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	NUNEZ, ROSE	LAKES BLVD., #305	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (GARRIOTTT, I 3140 GRANITI WOODSTOCK	ERD.	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BYRON ROSS MGR 04/28/2005