## 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N05000009972

Aug 11, 2009 Secretary of State

Entity Name: TURNBERRY OCEAN COLONY NORTH TOWER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

16051 COLLINS AVENUE SUNNY ISLES BEACH, FL 33160

**Current Mailing Address: New Mailing Address:** 

16051 COLLINS AVENUE SUNNY ISLES BEACH, FL 33160

FEI Number: 20-3546462 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

KAPLAN, AVI LEVY, LAWRENCE 16051 CÓLLINS AVENUE 16051 COLLINS AVENUE **SUITE 2804** SUITE 404

SUNNY ISLES BEACH, FL 33160 US SUNNY ISLES BEACH, FL 33160 US

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: LAWRENCE LEVY 08/11/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**PRES** () Delete (X) Change ( ) Addition KAPLAN, AVI LEVY, LAWRENCE Name: Name:

16051 COLLINS AVENUE, #2804 Address: 16051 COLLINS AVENUE, #404 Address: City-St-Zip: SUNNY ISLES BEACH, FL 33160 City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: Title: (X) Change ( ) Addition ( ) Delete GENERALOV, IGOR Name:

Name: ARREAZA, RAFAEL Address: 16051 COLLINS AVENUE, #1703 Address: 16051 COLLINS AVENUE, #2503 City-St-Zip: SUNNY ISLES BEACH, FL 33160 City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: TREA () Delete Title: TR/S (X) Change ( ) Addition KAUFMAN, MICHAEL KAUFMAN, MICHAEL Name: Name:

16051 COLLINS AVENUE, # 3704 Address: Address: 16051 COLLINS AVENUE, # 3704 City-St-Zip: SUNNY ISLES BEACH, FL 33160 City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: DIR (X) Delete Title: () Change () Addition

Name: SHELOMOVITZ, BARRY Name: Address: 16051 COLLINS AVENUE # 3604 Address: City-St-Zip: SUNNY ISLES BEACH, FL 33160 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: LAWRENCE LEVY **PRES** 08/11/2009