

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 08, 1999 8:00 am § Secretary of State 04-08-1999 90005 021 ****61.25

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DOCUMENT#	N9700	<u> </u>	

1. Corporation Name

TURNBE	rry isle at aberdeen a	SSOCIATION, INC.				- 	
Principal Place 3300 UNIVERS CORAL SPRIN	ITY DRIVE	Mailing Address 951 BROKEN SOUND PKWY STE 250 BOCA RATON FL 33487 US	· · · · · · · · · · · · · · · · · · ·				
2. Principal P	lace of Business	2a. Mailing Address		·	3. Date Incorporated or Qualifed		
21		26			01/28/1997		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			4. FEI Number	1 -1 ``	lied For
22	.,	27		<u> </u>	65-0762119		Applicable
City & Stat	e	City & State			5. Certificate of Status Desired	\$8.75 Ac	
23		28	Cou	ntry	6 - 1		
Zip	Country	Zip	Cou	nuy	6. Election Campaign Financing Trust Fund Contribution	\$5.00 N Added to	•
24	9. Name and Address of Curren		30		10. Name and Address of New Registe		1003
	5. Name and Address of Curren	t Registered Agent		81 Name	(taile and Address of New Address	nou Agont	
				commy	unity Association Se	AVICES.	
	stern aberdeen properties	, INC.			ess (P.O. Box Number is Not Acceptable)	#250	İ
	VERSITY DRIVE			83	Bloken Sound Pkury	800	
CORAL SI	PRINGS FL 33065			·			
	•			84 City DOCA	Raton	FL 85 Zip C	ode 87
₹11:=Pursuent	to the/arrovisions of Sections 617:050	2 and 617:1508; Florida Statute:	s, the al		and the second section of the second	se of changing its r	egistered == =
office or r	egistered agent, or both, in the State	of Florida, Such change was aut	thorized da Stati	I by the corporatio	oration-seconite-time statement for the purposen's board of directors. I hereby accept the a	appointment as reg	istered
	im tamiliar with, and accept the obliga		00 000	J. 100.	11-1290	Ł	
SIGNATURE	Signature, types of printed name of registered ager	nt and title if applicable. (NOTE: F	Registered	Agent signature required			
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTOR	'
TILE	PD	DELETE	1.1 111	rle		☐ Change	Addition :
NAME	BLACK, CHARLES	•	1.2 NA	ME .	•	*] }
STREET ADDRESS	3300 UNIVERSITY DRIVE		1.3 ST	REET ADDRESS			, ,
CITY-ST-ZIP	CORAL SPRINGS FL 33065			1			} !
TITLE	VD		1.4 CI	TY-ST-ZIP	• · · • · · · · · · · · · · · · · · · ·		
NAME		☐ DELETE	1.4 CI 2.1 TI		President	Change	Addition
OTDEET ADDRESS	EISNER, NEIL	☐ DELETE	_	LE .	Neil Eisner	Change	Addition
STREET ADDRESS	EISNER, NEIL 3300 UNIVERSITY DRIVE	☐ DELETE	2.1 Π 2.2 N	LE .	•	Change	Addition
CITY-ST-ZIP			2.1 TT 2.2 NA 2.3 ST 2.4 C	TLE NME REET ADDRESS ITY-ST-ZIP	Neil Eisner 951 Broken Sound Pkwy., #250 Boca Raton, FL 33487		
	3300 UNIVERSITY DRIVE CORAL SPRINGS FL 33065 VSTD	□ DELETE	2.1 TT 2.2 NA 2.3 ST	TLE NME REET ADDRESS ITY-ST-ZIP	Neil Eisner 951 Broken Sound Pkwy., #250 Boca Raton, FL 33487 Secretary/Treasurer	☐ Change	Addition Addition
CITY-ST-ZIP	3300 UNIVERSITY DRIVE CORAL SPRINGS FL 33065 VSTD YUTER, RONALD		2.1 TII 2.2 NA 2.3 ST 2.4 CI 3.1 TII 3.2 NA	ILE ME REET ADDRESS ITY-ST-ZIP ILE	Neil Eisner 951 Broken Sound Pkwy., #250 Boca Raton, FL 33487 Secretary/Treasurer Cora DiFiore		
CITY-ST-ZIP	3300 UNIVERSITY DRIVE CORAL SPRINGS FL 33065 VSTD YUTER, RONALD 3300 UNIVERSITY DRIVE		2.1 TTT 2.2 NA 2.3 ST 2.4 CT 3.1 TTT 3.2 NA 3.3 ST	ILE ME REET ADDRESS ITY-ST-ZIP ILE MME REET ADDRESS	Neil Eisner 951 Broken Sound Pkwy., #250 Boca Raton, FL 33487 Secretary/Treasurer		
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	3300 UNIVERSITY DRIVE CORAL SPRINGS FL 33065 VSTD YUTER, RONALD	DELETE	2.1 TTI 2.2 NA 2.3 ST 2.4 CI 3.1 TTI 3.2 NA 3.3 ST 3.4 CI	ILE ME REET ADDRESS ITY-ST-ZIP ILE MME REET ADDRESS ITY-ST-ZIP	Neil Eisner 951 Broken Sound Pkwy., #250 Boca Raton, FL 33487 Secretary/Treasurer Cora DiFiore 951 Broken Sound Pkwy., #250	☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	3300 UNIVERSITY DRIVE CORAL SPRINGS FL 33065 VSTD YUTER, RONALD 3300 UNIVERSITY DRIVE		2.1 TTT 2.2 NA 2.3 ST 2.4 CC 3.1 TTT 3.2 NA 3.3 ST 3.4. CC	ILE ME REET ADDRESS ITY-ST-ZIP ILE ME REET ADDRESS ITY-ST-ZIP ILE	Neil Eisner 951 Broken Sound Pkwy., #250 Boca Raton, FL 33487 Secretary/Treasurer Cora DiFiore 951 Broken Sound Pkwy., #250		
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	3300 UNIVERSITY DRIVE CORAL SPRINGS FL 33065 VSTD YUTER, RONALD 3300 UNIVERSITY DRIVE	DELETE	2.1 TTT 2.2 NA 2.3 ST 2.4 CI 3.1 TTT 3.2 NA 3.3 ST 3.4. CI 4.1 TTT 4.2 NA	ILE ME REET ADDRESS ITY-ST-ZIP ILE ME REET ADDRESS ITY-ST-ZIP ILE AME	Neil Eisner 951 Broken Sound Pkwy., #250 Boca Raton, FL 33487 Secretary/Treasurer Cora DiFiore 951 Broken Sound Pkwy., #250	☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	3300 UNIVERSITY DRIVE CORAL SPRINGS FL 33065 VSTD YUTER, RONALD 3300 UNIVERSITY DRIVE	DELETE	2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4. CI 4.1 TIT 4.2 NA 4.3 ST	TLE MMÉ REET ADDRESS MY-ST-ZIP TLE MME REET ADDRESS MY-ST-ZIP TLE AME REET ADDRESS	Neil Eisner 951 Broken Sound Pkwy., #250 Boca Raton, FL 33487 Secretary/Treasurer Cora DiFiore 951 Broken Sound Pkwy., #250	☐ Change	Addition
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	3300 UNIVERSITY DRIVE CORAL SPRINGS FL 33065 VSTD YUTER, RONALD 3300 UNIVERSITY DRIVE	DELETE	2.1 TIT 2.2 NA 2.3 ST 2.4 CC 3.1 TIT 3.2 NA 3.3 ST 3.4 CC 4.1 TIT 4.2 N. 4.3 ST 4.4 CC	TLE MMÉ REET ADDRESS ITY-ST-ZIP TREET ADDRESS ITY-ST-ZIP TLE AME REET ADDRESS TY-ST-ZIP TREET ADDRESS TY-ST-ZIP TLE	Neil Eisner 951 Broken Sound Pkwy., #250 Boca Raton, FL 33487 Secretary/Treasurer Cora DiFiore 951 Broken Sound Pkwy., #250	☐ Change	Addition
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	3300 UNIVERSITY DRIVE CORAL SPRINGS FL 33065 VSTD YUTER, RONALD 3300 UNIVERSITY DRIVE	DELETE DELETE	2.1 TTT 2.2 NA 2.3 ST 2.4 CC 3.1 TTT 3.2 NA 3.3 ST 3.4. CC 4.1 TTT 4.2 NA 4.3 ST 4.4 CC 5.1 TTT 5.2 NA 5.3 ST 5.4 CC	TLE MMÉ REET ADDRESS ITY-ST-ZIP TLE MME REET ADDRESS ITY-ST-ZIP TLE AME REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP	Neil Eisner 951 Broken Sound Pkwy., #250 Boca Raton, FL 33487 Secretary/Treasurer Cora DiFiore 951 Broken Sound Pkwy., #250	☐ Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	3300 UNIVERSITY DRIVE CORAL SPRINGS FL 33065 VSTD YUTER, RONALD 3300 UNIVERSITY DRIVE	DELETE	2.1 TTT 2.2 NA 2.3 ST 2.4 CI 3.1 TTT 3.2 NA 3.3 ST 3.4. CI 4.1 TTT 4.2 N. 4.3 ST 4.4 CI 5.1 TTT 5.2 NA 5.3 ST 5.4 CI 6.1 TTT	TLE MMÉ REET ADDRESS MY-ST-ZIP TLE MME REET ADDRESS MY-ST-ZIP TLE AME REET ADDRESS TY-ST-ZIP TLE MME	Neil Eisner 951 Broken Sound Pkwy., #250 Boca Raton, FL 33487 Secretary/Treasurer Cora DiFiore 951 Broken Sound Pkwy., #250	☐ Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	3300 UNIVERSITY DRIVE CORAL SPRINGS FL 33065 VSTD YUTER, RONALD 3300 UNIVERSITY DRIVE CORAL SPRINGS FL 33065	DELETE DELETE	2.1 TTT 2.2 NA 2.3 ST 2.4 CC 3.1 TTT 3.2 NA 3.3 ST 3.4. CC 4.1 TTT 4.2 N. 4.3 ST 4.4 CC 5.1 TTT 5.2 NA 5.3 ST 5.4 CC 6.1 TTT 6.2 NA 6.2	TLE MMÉ REET ADDRESS ITY-ST-ZIP ILE MME REET ADDRESS ITY-ST-ZIP ILE AME REET ADDRESS ITY-ST-ZIP ILE MME IREET ADDRESS ITY-ST-ZIP ILE MME IREET ADDRESS ITY-ST-ZIP ILE MME IREET ADDRESS ITY-ST-ZIP ILE MME AME AME AME AME AME AME A	Neil Eisner 951 Broken Sound Pkwy., #250 Boca Raton, FL 33487 Secretary/Treasurer Cora DiFiore 951 Broken Sound Pkwy., #250	☐ Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	3300 UNIVERSITY DRIVE CORAL SPRINGS FL 33065 VSTD YUTER, RONALD 3300 UNIVERSITY DRIVE CORAL SPRINGS FL 33065	DELETE DELETE	2.1 TIT 2.2 NA 2.3 ST 2.4 CI 3.1 TIT 3.2 NA 3.3 ST 3.4. CI 4.1 TIT 4.2 N. 4.3 ST 4.4 CI 5.1 TIT 5.2 NA 5.3 ST 5.4 CI 6.1 TIT 6.2 NA 6.3 ST	TLE MMÉ REET ADDRESS MY-ST-ZIP TLE MME REET ADDRESS MY-ST-ZIP TLE AME REET ADDRESS TY-ST-ZIP TLE MME	Neil Eisner 951 Broken Sound Pkwy., #250 Boca Raton, FL 33487 Secretary/Treasurer Cora DiFiore 951 Broken Sound Pkwy., #250	☐ Change	Addition Addition

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 ecciver or interest 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, with all other like empowered. officer or director of the corporation or the Block 12 or Block 13 if changed, or on a

SIGNATURE: