

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719189

**FILED
Mar 19, 2019
Secretary of State
2528599263CC**

Entity Name: TURTLE CREEK VILLAGE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O CAPITAL REALTY ADVISORS, INC.
600 SANDTREE DRIVE, SUITE 109
PALM BEACH GARDENS, FL 33403

Current Mailing Address:

C/O CAPITAL REALTY ADVISORS, INC.
600 SANDTREE DRIVE, SUITE 109
PALM BEACH GARDENS, FL 33403 US

FEI Number: 59-1822207

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORNETT, JANE L
401 SE OSCEOLA ST.
SUITE 101
STUART, FL 34994 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MAGAR, LARRY
Address C/O CAPITAL REALTY ADVISORS,
 INC.
 600 SANDTREE DRIVE
City-State-Zip: PALM BEACH GARDENS FL 33403

Title VP
Name LOVELADY, JASON H.F.
Address C/O CAPITAL REALTY ADVISORS,
 INC.
 600 SANDTREE DRIVE, SUITE 109
City-State-Zip: PALM BEACH GARDENS FL 33403

Title SECRETARY
Name CROPP, RANDY
Address C/O CAPITAL REALTY ADVISORS,
 INC.
 600 SANDTREE DRIVE, SUITE 109
City-State-Zip: PALM BEACH GARDENS FL 33403

Title TREASURER
Name HERCHEN, PAUL
Address C/O CAPITAL REALTY ADVISORS,
 INC.
 600 SANDTREE DRIVE, SUITE 109
City-State-Zip: PALM BEACH GARDENS FL 33403

I hereby 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 all other like empowered.

SIGNATURE: PAUL HERCHEN

TREASURER

03/19/2019

Electronic Signature of Signing Officer/Director Detail

Date