

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719189

FILED
Mar 03, 2022
Secretary of State
7689166445CC**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	HERCHEN, PAUL
Address	C/O CAPITAL REALTY ADVISORS, INC.
City-State-Zip:	PALM BEACH GARDENS FL 33403

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

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

Title	TREASURER
Name	HARTMAN, PAUL
Address	C/O CAPITAL REALTY ADVISORS, INC.
City-State-Zip:	PALM BEACH GARDENS FL 33403

Title	DIRECTOR
Name	BLACKMON, DIANE
Address	C/O CAPITAL REALTY ADVISORS, INC.
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**PRESIDENT****03/03/2022**

Electronic Signature of Signing Officer/Director Detail

Date