

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750513

Entity Name: TURTLE BAY CONDOMINIUM OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8735 MIDNIGHT PASS ROAD
#104B
SARASOTA, FL 34242

Current Mailing Address:

8735 MIDNIGHT PASS ROAD
#104B
SARASOTA, FL 34242

FEI Number: 59-2067718

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHOOLEY, LYNNE
8735 MIDNIGHT PASS ROAD
#104B
SARASOTA, FL 34242 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 S
Name FORTSCH, PHILLIP
Address 8701 MIDNIGHT PASS ROAD
502A
City-State-Zip: SARASOTA FL 34242

Title T
Name FERDINAND, RUSSELL
Address 8735 MIDNIGHT PASS RD
201B
City-State-Zip: SARASOTA FL 34242

Title VP
Name DEDRICK, MARY ANN
Address 8735 MIDNIGHT PASS ROAD
405B
City-State-Zip: SARASOTA FL 34242

Title P
Name SCHWARTZ, MARTIN
Address 8735 MIDNIGHT PASS ROAD
202B
City-State-Zip: SARASOTA FL 34242

Title VP
Name RASMUSSEN, JOHN
Address 8701 MIDNIGHT PASS RD
605A
City-State-Zip: SARASOTA FL 34242

Title ASST. SECRETARY
Name TRUSCOTT, MILDRED
Address 8701 MIDNIGHT PASS ROAD
505A
City-State-Zip: SARASOTA FL 34242

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: MARTIN SCHWARTZ

PRESIDENT

04/24/2015

Electronic Signature of Signing Officer/Director Detail

Date