

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757057

Entity Name: THE TERRACES NORTH AT TURNBERRY CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**20191 E. COUNTRY CLUB DR.
ADVENTURA, FL 33180**Current Mailing Address:**20191 E. COUNTRY CLUB DR.
ADVENTURA, FL 33180**FEI Number: 59-2316769****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SKRLD, INC.
201 ALHAMBRA CIR
STE 1102
CORAL GABLES, FL 33134 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 PD
Name KIPPERMAN, JERRY
Address 20191 E COUNTRY CLUB DR
City-State-Zip: AVENTURA FL 33180

Title VD
Name GINSBERG, BURTON
Address 20191 E. COUNTRY CLUB DRIVE
City-State-Zip: AVENTURA FL 33180

Title SD
Name JONES, RICHARD
Address 20191 E. COUNTRY CLUB DRIVE
City-State-Zip: AVENTURA FL 33180

Title TD
Name DEMEO, THERESA
Address 20191 E. COUNTRY CLUB DRIVE
City-State-Zip: AVENTURA FL 33180

Title DIRECTOR
Name STEMLER, CINDY
Address 20191 E. COUNTRY CLUB DR.
City-State-Zip: ADVENTURA FL 33180

Title DIRECTOR
Name BAU, EMILY
Address 20191 E. COUNTRY CLUB DR.
City-State-Zip: ADVENTURA FL 33180

Title DIRECTOR
Name VALLADARES, CARLOS
Address 20191 E. COUNTRY CLUB DR.
City-State-Zip: ADVENTURA FL 33180

Title DIRECTOR
Name KATZ, ROBERT
Address 20191 E. COUNTRY CLUB DR.
City-State-Zip: ADVENTURA FL 33180

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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: JERRY KIPPERMAN

PD

04/16/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	ALBIN, SIDNEY
Address	20191 E. COUNTRY CLUB DR.
City-State-Zip:	ADVENTURA FL 33180