

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000001453

**FILED  
Apr 30, 2015  
Secretary of State  
CC1596379012**

**Entity Name:** TURNAROUND MANAGEMENT ASSOCIATION OF FLORIDA, INC.

**Current Principal Place of Business:**

C/O TABITHA MOORE  
1570 FARRINDON CIRCLE  
HEATHROW, FL 32746

**Current Mailing Address:**

TURNAROUND MANAGEMEN ASSOC. OF FLORIDA  
P.O. BOX 3466  
ORLANDO, FL 32802 US

**FEI Number: 65-1089785**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MOORE, TABITHA  
1570 FARRINDON CIRCLE  
HEATHROW, FL 32746 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	P	Title	VP
Name	TIMKO, JAMES	Name	SMITH, SUSAN
Address	PO BOX 3466	Address	PO BOX 3466
City-State-Zip:	ORLANDO FL 32802	City-State-Zip:	ORLANDO FL 32802

Title           DIRECTOR  
Name           MOORE, TABITHA  
Address        PO BOX 3466  
City-State-Zip: ORLANDO FL 32801

*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: TABITHA MOORE**

**DIRECTOR**

**04/30/2015**

Electronic Signature of Signing Officer/Director Detail

Date