

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006023

Entity Name: TURNING LEAF HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**8090 SE 62ND LOOP
OCALA, FL 34472**Current Mailing Address:**PO BOX 830572
OCALA, FL 34483**FEI Number:** 20-3063086**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GRANT, MELESIA
8090 SE 62ND LOOP
OCALA, FL 34472 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:** MELESIA GRANT

05/06/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name WOODSON, RODNEY
Address 8019 SE 62ND LANE
City-State-Zip: Ocala FL 34472

Title VP
Name EIDSON, DEIDRE
Address 6136 SE 80TH CT
City-State-Zip: Ocala FL 34472

Title TREASURER
Name GRANT, MELESIA
Address 8090 SE 62ND LOOP
City-State-Zip: Ocala FL 34472

Title SECRETARY
Name ADAMES, LORAIN
Address 8091 SE 62ND LOOP
City-State-Zip: Ocala FL 34472

Title DIRECTOR
Name BURKE, TAMEIKA
Address 6236 SE 80TH CT,
City-State-Zip: Ocala FL 34472

Title DIRECTOR
Name TANG YUK, JACQUELINE
Address 8066 SE 62ND LOOP
City-State-Zip: Ocala FL 34472

Title DIRECTOR
Name LINDSEY, DEANA
Address 8009 SE 62ND LANE
City-State-Zip: Ocala FL 34472

Title DIRECTOR
Name WILLIAMS, TYECHA
Address 6090 SE 80TH CT
City-State-Zip: Ocala FL 34472

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: MELESIA GRANT**TREASURER**

05/06/2018

Electronic Signature of Signing Officer/Director Detail

Date