

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000009429

**Entity Name:** ATLANTIC BEACH COUNTRY CLUB TURTLE FOUNDATION, INC.

**FILED**  
**Feb 07, 2024**  
**Secretary of State**  
**0766993678CC**

**Current Principal Place of Business:**

1600 SELVA MARINA DRIVE  
ATLANTIC BEACH, FL 32233

**Current Mailing Address:**

1600 SELVA MARINA DRIVE  
ATLANTIC BEACH, FL 32233 US

**FEI Number: 87-1741139**

**Certificate of Status Desired: No**

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

PITLER, ANDY  
1600 SELVA MARINA DRIVE  
ATLANTIC BEACH, FL 32233 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 D  
Name CROFT, BRYAN  
Address 1600 SELVA MARINA DRIVE  
City-State-Zip: ATLANTIC BEACH FL 32233

Title D, S  
Name PITLER, ANDREW  
Address 1600 SELVA MARINA DRIVE  
City-State-Zip: ATLANTIC BEACH FL 32233

Title D  
Name O'CONNOR, MICHAEL  
Address 1600 SELVA MARINA DRIVE  
City-State-Zip: ATLANTIC BEACH FL 32233

Title D, VP  
Name ULRICH, HENRY G  
Address 1600 SELVA MARINA DRIVE  
City-State-Zip: ATLANTIC BEACH FL 32233

Title D, P  
Name NATTER, VIRGINIA  
Address 1600 SELVA MARINA DRIVE  
City-State-Zip: ATLANTIC BEACH FL 32233

Title D, T  
Name WILLIAMS, LISA  
Address 1600 SELVA MARINA DRIVE  
City-State-Zip: ATLANTIC BEACH FL 32233

Title D  
Name WILKES, GREGG  
Address 1600 SELVA MARINA DRIVE  
City-State-Zip: ATLANTIC BEACH FL 32233

Title D  
Name POTTER, YVETTE  
Address 1600 SELVA MARINA DRIVE  
City-State-Zip: ATLANTIC BEACH FL 32233

*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: ANDREW PITLER**

**SECRETARY**

**02/07/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date