## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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**DOCUMENT #** 

453903

(7)

TURTLE DEVELOPMENT CORPORATION

Principal Place of Business	Mailing Address
2300 MACGREGOR BLVD FORT MYERS FL 33901	2300 MACGREGOR BLVD FORT MYERS FL 33901



						3. Date Incorporated or 0 05/30/1974	Qualified	3a. Date o	f Last R 25/19	eport <b>95</b>
_ ·	ace of Business	2a. Mailing Add	Iress			4. FEI Number 59-1686288		<u> </u>		Applied For
21		26				39-1000200				Not Applicable
Suite, Apt. :		Suite, Apt. :	#, etc.			5. Certificate of Status De	esired			Additional Required
City & State	9	City & State	)			6. Election Campaign Fin	ancing		\$5.0	O May Be
23		28				Trust Fund Contributio	ก			d to Fees
Zip	Country	Zip	_	Country		8. This corporation has lie			under s	199.032,
24	25	29	30			Florida Statutes	☐ Yes			
	9, Name and Address of	f Current Registered Agent		<del></del>		10. Name and Address	of New Re	gistered Ag	jent	
EOECHA	NI MADI			81 1	lame					
	AN, MARK			82 5	Street Addre	ss (P.O. Box Number is Not	Acceptable	e)		
	ACGREGOR BLVD							•		
FURI M	IYERS FL 33901			83						
				84 (	Dity				[05] =	- 0-1-
				- 1 1	•			F1		p Code
11. Pursuant to	to the provisions of Sections 6	07.0502 and 607.1508, Florid	da Statutes, the a	above-nan	ned corpora	tion submits this statement for	or the purp	ose of chance	ging its r	egistered offici
familiar wit	ed agent, or both, in the State th, and accept the obligations	e of Florida. Such change was .of. Section 607.0505. Florida	authorized by the Statutes	ne corpora	tion's board	d of directors. I hereby accept	t the appoi	ntment as re	gistered	lagent. I am
SIGNATURE _	•									
SIGNATURE	Signature typed or printed name of regist	tered agent and title if applicable	(NOTE: Registe	ered Agent sig	nature required	when reinstating		DATE		
12.		ERS AND DIRECTORS		3.		ADDITIONS/CHANGES	TO OFFIC	ERS AND D	IRECTO	RS IN 12
7.7.5	PD									
HILE	, · •	☐ DEI	LETE 1.	. I TITLE					Change	Addition
TITLE NAME	FREEMAN, MARK			. 1 TITLE .2 Name					Change	Addition
	FREEMAN, MARK 2300 MCGREGOR BLV		1.		DRESS				Change	☐ Addition
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4. For field of feeting that the information supplied with this filing is we infanily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this finual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the recently or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block is if than year, or on an attachment with an address.

SIGNATURE

OFFICER OF BIRECTOR

4/22/96 33 2.313