

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 90121 028 ****61.25

DOCUMENT # 741577

1. Entity Name

TURKEY CREEK CLUB VILLA OWNERS ASSOCIATION, INC.



Principal Place of Business

**11401 PALMETTO BLVD
ALACHUA FL 32615
US**

Mailing Address

**C/O ACTION REALTY
61408 NW 1 PL
GAINESVILLE FL 32607
US**

2. Principal Place of Business

6516 NW 115TH LANE

Suite, Apt. #, etc.

3. Mailing Address

213 Turkey Creek

Suite, Apt. #, etc.

City & State

ALACHUA, FL

City & State

Alachua FL.

Zip

32615

Country

US

Zip

32615

Country

US

4. FEI Number **59-1934066**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**ACTION MANAGEMENT
B. JEFFREY SAUSAMAN
61408 NW 1 PL
GAINESVILLE FL 32607**

Change
→

7. Name and Address of New Registered Agent

Name **Arlene Alexander**
Street Address (P.O. Box Number is Not Acceptable)
213 Turkey Creek
City **Alachua, FL** Zip Code **32615**

8. 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. I am familiar with, and accept the obligations of registered agent.

ARLENE ALEXANDER, TREASURER

SIGNATURE **Arlene Alexander, Treasurer**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3-11-03

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME	PD KIESZEK, DAVID	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	324 TURKEY CREEK	
CITY-ST-ZIP	ALACHUA FL 32615	
TITLE NAME	SD ALEXANDER, ARLENE	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	213 TURKEY CREEK	
CITY-ST-ZIP	ALACHUA FL 32615	
TITLE NAME	D MCGINLEY, JAMES	<input type="checkbox"/> Delete
STREET ADDRESS	258 TURKEY CREEK	
CITY-ST-ZIP	ALACHUA FL	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	Eve Daniel (D) Sec	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	327 Turkey Creek JOINTLY w/	
CITY-ST-ZIP	Alachua, FL 32615 DON MCBRIDE	
TITLE NAME	Kay Dougherty (D) VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	159 Turkey Creek JOINTLY w/	
CITY-ST-ZIP	Alachua, FL 32615 KERRARD	
TITLE NAME		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	TD ALEXANDER, ARLENE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	213 TURKEY CREEK	
CITY-ST-ZIP	ALACHUA, FL 32615	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **ARLENE ALEXANDER** **3-11-03** **(386) 462-5607**

CR2E037 (10/02)