2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2006
Secretary of State

DOCUMENT# 748150

Entity Name: TURNBERRY ISLE SOUTH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

19667 TURNBERRY WAY
NORTH MIAMI BEACH, FL 33180

New Principal Place of Business:

Current Mailing Address:

19667 TURNBERRY WAY
NORTH MIAMI BEACH, FL 33180

New Mailing Address:

FEI Number: 59-1980227 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BLAXBERG, BARRY I
25 SE AVE #730
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	SINGERMAN, GIBBY	
Address:	19667 TURNBERRY WAY	
City-St-Zip:	AVENTURA, FL 33180	
Title:	VP	( ) Delete
Name:	ZAGHA, ABRAHAM	
Address:	19667 TRUNBERY WAY	
City-St-Zip:	AVENTURA, FL 33180	
Title:	VP	( ) Delete
Name:	AUGUST, JOEL	
Address:	19667 TURNBERRY WAY	
City-St-Zip:	AVENTURA, FL 33180	
Title:	TD	( ) Delete
Name:	GINDI, JOSEPH	
Address:	19667 TURNBERRY WAY	
City-St-Zip:	AVENTURA, FL 33180	
Title:	SD	( ) Delete
Name:	HAZEN, MARTIN	
Address:	19667 TURNBERRY WAY	
City-St-Zip:	AVENTURA, FL 33180	
Title:	D	( ) Delete
Name:	TORNBERG, RALPH	
Address:	19667 TURNBERRY WAY	
City-St-Zip:	AVENTURE, FL 33180	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOEL AUGUST VP 01/06/2006

Electronic Signature of Signing Officer or Director — Date