2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2009
Secretary of State

DOCUMENT# 748227

Entity Name: TURKEY ROOST FARMS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1530 MCLAWRENCE WAY
TALLAHASSEE, FL 32317 US

New Principal Place of Business:

Current Mailing Address:

1530 MCLAWRENCE WAY
TALLAHASSEE, FL 32317 US

New Mailing Address:

FEI Number: 59-2410592 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUCHANAN, DJ
1530 MCLAWRENCE WAY
TALLAHASSEE, FL 32317 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: DT ( ) Delete
Name: BUCHANAN, DERYL J
Address: 1530 MCLAWRENCE WAY
City-St-Zip: TALLAHASSEE, FL 32317

Title: P ( ) Delete
Name: HANF, STEPHEN
Address: 1519 BIG SLAY WY
City-St-Zip: TALLAHASSEE, FL 32317

Title: DS ( ) Delete
Name: SKORNIA, SUSAN
Address: 1529 MCLAWRENCE WAY
City-St-Zip: TALLAHASSEE, FL 32317

Title: VP ( ) Delete
Name: BYLE, ROY
Address: 1538 MCLAWRENCE WY
City-St-Zip: TALLAHASSEE, FL 32317

Title: MGR ( ) Delete
Name: ALLEN, ANNE
Address: 1517 BAUM RD
City-St-Zip: TALLAHASSEE, FL 32317

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:

I hereby certify that the information supplied with this filing does not qualify 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: D J BUCHANAN TREA 03/02/2009

Electronic Signature of Signing Officer or Director — Date