

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2006 8:00 am
Secretary of State

04-18-2006 90086 036 ****61.25

DOCUMENT # 750513

1. Entity Name
TURTLE BAY CONDOMINIUM OWNERS ASSOCIATION, INC.



Principal Place of Business
**8735 MIDNIGHT PASS ROAD
#104B
SARASOTA, FL 34242**

Mailing Address
**8735 MIDNIGHT PASS ROAD
#104B
SARASOTA, FL 34242**

50013339



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04112006 Chg-NP

CR2E037 (11/05)

4. FEI Number
59-2067718

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MARSH, BURRELL H. III
8735 MIDNIGHT PASS ROAD
#104B
SARASOTA, FL 34242**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

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
STREET ADDRESS
CITY-ST-ZIP
**P
MARSH, BURRELL H III
8735 MIDNIGHT PASS RD. 502B
SARASOTA, FL 34242** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
MACKENZIE, RICHARD
8735 MIDNIGHT PASS ROAD # B-663
SARASOTA, FL 34242** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DVP
MOSCA, FRANK
8701 MIDNIGHT PASS ROAD
SARASOTA, FL 34242** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
SMITH, RAYMOND
8701 MIDNIGHT PASS RD #202A
SARASOTA, FL 34242** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
DINWOODIE, HUGH
8701 MIDNIGHT PASS RD 404A
SARASOTA, FL 34242** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
Robert Williams
8735 Midnight Pass Rd #406B
SARASOTA FL 34242** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
Jon Halsted
8701 Midnight Pass Rd #302A
SARASOTA FL 34242** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DVP
Thomas Jensen
8735 Midnight Pass Rd #405B
SARASOTA FL 34242** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

RICHARD MACKENZIE

4-14-06

941 349-7300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #