2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2010
Secretary of State

DOCUMENT# 754984

Entity Name: TORTOISE VIEW HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

492 TORTOISE VIEW CIRCLE
SATELLITE BEACH, FL 32937

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 372194
SATELLITE BEACH, FL 32937

New Mailing Address:

FEI Number: 59-2898479 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RUSCILLO, DEBORAH
492 TORTOISE VIEW CR
SATELLITE BEACH, FL 32937 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: DMAL
Name: PALMER, GREG
Address: 484 TORTOISE VIEW CIR
City-St-Zip: SATELLITE BEACH, FL 32937

Title: P
Name: RUSCILLO, DEBORAH
Address: 492 TORTOISE VIEW CR
City-St-Zip: SATELLITE BEACH, FL 32937

Title: S
Name: KALINA, DEBI
Address: 455 TORTOISE VIEW CIR.
City-St-Zip: SATELLITE BEACH, FL 32937

Title: T
Name: MCCOWEN, BECKY
Address: 476 TORTOISE VIEW CIR
City-St-Zip: SATELLITE BEACH, FL 32937

Title: DMAL
Name: MORIARTY, MARTHA
Address: 460 TORTOISE VIEW CR
City-St-Zip: SATELLITE BEACH, FL 32937

I hereby 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 all other like empowered.

SIGNATURE: DEBORAH RUSCILLO PRES 02/23/2010
Electronic Signature of Signing Officer or Director Date