

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761929

FILED
Jan 21, 2009
Secretary of State

Entity Name: TURNER TRACE TOWNHOMES OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

7001 TEMPLE TERRACE HWY
TAMPA, FL 33637

New Principal Place of Business:

Current Mailing Address:

7001 TEMPLE TERRACE HWY
TAMPA, FL 33637

New Mailing Address:

FEI Number: 59-2267871

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TANKEL, ROBERT L
1022 MAIN ST.
SUITE D
DUNENDIN, FL 34680 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: D () Delete
Name: FERRELL, PAULETTE
Address: 5322 BRADBURY COURT
City-St-Zip: TAMPA, FL 33624

Title: DP () Delete
Name: WILDE, GINA
Address: 5327 BRAD BURY CT
City-St-Zip: TAMPA, FL 33624

Title: DS () Delete
Name: RICE, VIRGINIA
Address: 14215 WELLESLEY DR
City-St-Zip: TAMPA, FL 33624

Title: DVP () Delete
Name: BEAL, DAN
Address: 14209 WELLESLEY DR
City-St-Zip: TAMPA, FL 33624

Title: DT () Delete
Name: DINDAL, SCOTT
Address: 14205 WELLESLEY DRIVE
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LAWTON, DIANE
Address: 5304 RIDGEWELL CT
City-St-Zip: TAMPA, FL 33624

Title: DP (X) Change () Addition
Name: WILDE, GINA
Address: 5327 BRADBURY CT
City-St-Zip: TAMPA, FL 33624

Title: DS (X) Change () Addition
Name: RICE, VIRGINIA
Address: 14215 WELLESLEY DR
City-St-Zip: TAMPA, FL 33624

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: GINA WILDE

P

01/21/2009

Electronic Signature of Signing Officer or Director

Date