

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766237

FILED
Apr 27, 2007
Secretary of State

Entity Name: TURTLE INN BEACH CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3233 S ATLANTIC AVE
DAYTONA BCH SHORES, FL 321186256

New Principal Place of Business:

Current Mailing Address:

3233 S ATLANTIC AVE
DAYTONA BCH SHORES, FL 321186256

New Mailing Address:

FEI Number: 59-2280110

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARTIN, CALVIN
1600 PENNSYLVANIA AVE
BRONSON, FL 32763 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: VP () Delete
Name: PARTIN, CALVIN
Address: 1600 PENNSYLVANIA AVE
City-St-Zip: BRONSON, FL

Title: P () Delete
Name: DRYDEN, FRED
Address: 504 FABER DR
City-St-Zip: ORLANDO, FL

Title: SD () Delete
Name: DENSON, DINGLER
Address: 3608 S.E. 33 COURT
City-St-Zip: ORLANDO, FL 326717048

Title: D () Delete
Name: CHRISTIAN, DEBRA
Address: 11 PRESWICK LANE
City-St-Zip: PALM CONST, FL 37164

Title: TD () Delete
Name: NAFRADY, MARY
Address: 36 ROCKEDELLER DR
City-St-Zip: ORMOND BEACH, FL 32176

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: CALVIN PARTIN

VP

04/27/2007

Electronic Signature of Signing Officer or Director

Date