2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2008
Secretary of State

DOCUMENT# N01000000282

Entity Name: TURTLE NEST VILLAGE INC.

Current Principal Place of Business:

900 OSCEOLA DR.
SUITE 222
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

900 OSCEOLA DR.
SUITE 222
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 65-1078279 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROWN, ELIZABETH
1202 SOUTH PALMWAY
LAKE WORTH, FL 33460 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: P ( ) Delete
Name: FLEMING, CHRISTOPHER F
Address: 520 SOUTH PALMWAY
City-St-Zip: LAKE WORTH, FL 33460

Title: VP ( ) Delete
Name: MARTIN, MARY
Address: PO BOX 9134
City-St-Zip: JUPITER, FL 33468

Title: ED ( ) Delete
Name: BROWN, ELIZABETH
Address: 1202 SOUTH PALM WAY
City-St-Zip: LAKE WORTH, FL 33460

Title: S ( ) Delete
Name: MELTZER, ROSS
Address: 265 GRANADA RD
City-St-Zip: WEST PALM BEACH, FL 33401

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:

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: ELIZABETH BROWN ED 02/22/2008

Electronic Signature of Signing Officer or Director — Date