

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 22, 2006 8:00 am
Secretary of State

02-20-2006 90058 049 ****61.25

DOCUMENT # N01000002891						
1. Entity Name TURNBERRY PLACE HOMEOWNERS ASSOCIATION, INC.						
Principal Place of Business 4 LAGUNA STREET SUITE 201 FORT WALTON BEACH, FL 32548			Mailing Address 4 LAGUNA STREET SUITE 201 FORT WALTON BEACH, FL 32548			
2. Principal Place of Business Turnberry Place Homeowners Association		3. Mailing Address 473 Turnberry Rd				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				
City & State		City & State CANTONMENT FL				
Zip	Country	Zip 32533	Country	4. FEI Number 04-3589952		
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent DEL GALLO, STEVE 4 LEGUNA ST SUITE 201 FORT WALTON BEACH, FL 32548			7. Name and Address of New Registered Agent Name: Mary D. Krinhop Street Address (P.O. Box Number is Not Acceptable): 473 Turnberry Rd City: CANTONMENT, FL Zip Code: 32533			
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 <i>Mary Dunn Krinhop</i> Signature, typed or printed name of registered agent and title if applicable.			DATE 2-9-06 (NOT Registered Agent signature required when renewing)			
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE D	NAME HUDNALL, DUNCAN		☒ Delete	TITLE DIRECTOR	NAME MARY DUNN KRINHOP	
STREET ADDRESS 5508 N. W STREET	CITY - ST - ZIP PENSACOLA, FL 32505		STREET ADDRESS 473 Turnberry Rd			
CITY - ST - ZIP PENSACOLA, FL 32505			CITY - ST - ZIP CANTONMENT, FL 32533			
TITLE D	NAME HUDNALL, DUNCAN		☐ Delete	TITLE DIRECTOR	NAME JOHN NICKERSON	
STREET ADDRESS 5508 N. W STREET	CITY - ST - ZIP PENSACOLA, FL 32505		STREET ADDRESS 447 Turnberry Rd			
CITY - ST - ZIP PENSACOLA, FL 32505			CITY - ST - ZIP CANTONMENT, FL 32533			
TITLE D	NAME HUDNALL, DUNCAN		☐ Delete	TITLE DIRECTOR	NAME DAVID BARREA	
STREET ADDRESS 5508 N. W STREET	CITY - ST - ZIP PENSACOLA, FL 32505		STREET ADDRESS 453 Turnberry Rd			
CITY - ST - ZIP PENSACOLA, FL 32505			CITY - ST - ZIP CANTONMENT, FL 32533			
TITLE D	NAME HUDNALL, DUNCAN		☐ Delete	TITLE D	NAME HUDNALL, DUNCAN	
STREET ADDRESS 5508 N. W STREET	CITY - ST - ZIP PENSACOLA, FL 32505		STREET ADDRESS 5508 N. W STREET			
CITY - ST - ZIP PENSACOLA, FL 32505			CITY - ST - ZIP PENSACOLA, FL 32505			
TITLE D	NAME HUDNALL, DUNCAN		☐ Delete	TITLE D	NAME HUDNALL, DUNCAN	
STREET ADDRESS 5508 N. W STREET	CITY - ST - ZIP PENSACOLA, FL 32505		STREET ADDRESS 5508 N. W STREET			
CITY - ST - ZIP PENSACOLA, FL 32505			CITY - ST - ZIP PENSACOLA, FL 32505			
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: <i>Mary Dunn Krinhop</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			DATE 2-9-06			
850			469-2315			