

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01029

FILED
Apr 15, 2009
Secretary of State

Entity Name: TURNBURY WOODS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2582 S MAGUIRE RD
SUITE 318
OCOE, FL 34761

New Principal Place of Business:

709 E. MICHIGAN STREET
ORLANDO, FL 32806

Current Mailing Address:

P O BOX 783367
WINTER GARDEN, FL 34778

New Mailing Address:

P.O. BOX 560698
ORLANDO, FL 32856 US

FEI Number: 59-2853591

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOLOMON, SPENCER RA
14443 PRUNNINGWOOD PLACE
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

MITCHELL, TRACY L
709 E. MICHIGAN STREET
ORLANDO, FL 32806 US

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: TRACY L. MITCHELL

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: MORISON, JOHN
Address: 5355 SHADYWOOD LANE
City-St-Zip: ORLANDO, FL 32819

Title: PD () Delete
Name: MALICK, KEITH
Address: 5310 FAYWOOD CT
City-St-Zip: ORLANDO, FL 32819

Title: SD () Delete
Name: DOYLE, CHARLES
Address: 8731 FERNWICKE COURT
City-St-Zip: ORLANDO, FL 32819

Title: VPD () Delete
Name: WOOD, JAMES
Address: 5363 SHADYWOOD LN
City-St-Zip: ORLANDO, FL 32819

Title: D () Delete
Name: JAMES, DANIELL
Address: 8603 MINDICH CT
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: WHITE, JON
Address: 5326 FAYWOOD CT
City-St-Zip: ORLANDO, FL 32819

Title: PD (X) Change () Addition
Name: DOYLE, CHARLES
Address: 8731 FERNWICKE COURT
City-St-Zip: ORLANDO, FL 32819

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: JAMES, DANIELL
Address: 8603 MINDICH CT
City-St-Zip: ORLANDO, FL 32819

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: JOHN MORRISON

TD

04/15/2009

Electronic Signature of Signing Officer or Director

Date