DOCLIMENT # NIO2080

1. Entity Name TURTLE BEACH OF OCEAN RIDGE CONDOMINIUM ASSOCIAT					Secretary of State 02-24-2000 90057 038 ****61.25		
Principal Plac	e of Business	Mailing Address					
5101 N. OCEAN BLVE. OCEAN RIDGE FL 33435		5101 N. OCEAN BLVE. OCEAN RIDGE FL 33435			010012		
2. Principal P	lace of Business	3. Mailing Address 7187 Thompson Ro		Ro			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	·		DO NOT WRITE IN T	HIS SPACE	
City & State	9	Bounton Beach		4. FEI Numbe	4. FEI Number Applied For Not Applicable		
Zip	Country	Z _F O	Country	5. Certificate	of Status Desired	\$8.75 Additional Fee Required	
	6. Name and Address of Current I	Registered Agent		7. Name and	Address of New Registe	red Agent	
				Street Address (P.O., Box Number is Not Acceptable)			
	, ROSALEEN OCEAN BLVD						
5109-C N OCEAN BLVD OCEAN RIDGE FL 33435			7187 Thompson'KOAD				
City Boynton Beac						FL 33426	
8. The above	named entity submits this statement for	the purpose of changing its re	gistered office or	registered agent, or bot	h, in the state of Florida.		
SIGNATURE .	Signature, typed or pyffed name of registered agent a	Juckaby and title if applicable. In TE: 1	Registered Agent signat	ure required when reinstating)	2-/	4-00 ATE	
FILE NOW: FEE IS \$61.25				\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIF	RECTORS	11.		ANGES TO OFFICERS AN		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CANTER, CARL 5111C N OCEAN BLVD OCEAN RIDGE FL	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	51096	Lenberge North Ocea Idge, FL	Change Addition A Blvd 33435	
NAME STREET ADDRESS CITY-ST-ZIP	VD NACARATO, PETER 5109-B N OCEAN BLVD OCEAN RIDGE FL	Delete	NAME STREET ADDRESS CITY-ST-ZIP		North Oce Piage, FL	33435	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GOLDSTEIN, HELEN 5109-F. N OCEAN BLVD OCEAN RIDGE FL	Delete	TITLE NAME STREET ADDRESS CITY-ST-2IP	6010578 5109 F CCEAN	North Oc Ridge, FL	33435 BLVd	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CRAWLEY, LOYD 5107-B N OCEAN BLVD OCEAN RIDGE FL	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SIDS D CEAN R	R & BOB NORTH C	CEAN BIVE 33435	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MCKENNA, ROSALEEN 5109-C N OCEAN BLVD OCEAN RIDGE FL 33435	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Colgert, 5109-C	Pat U. Ocean Ribbe Fl	Change XAddition GLYP. 33435	
TITLE	,	☐ Delete	TITLE			Change Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE SIX CUSTY ED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR