2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# N02980

Entity Name: TURTLE BEACH OF OCEAN RIDGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

21045 COMMERCIAL TRAIL
BOCA RATON, FL 33486 US

New Principal Place of Business:

Current Mailing Address:

21045 COMMERCIAL TRAIL
BOCA RATON, FL 33486 US

New Mailing Address:

FEI Number: 65-0390237 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ISSACSON, WILLIAM
21045 COMMERCIAL TRAIL
BOCA RATON, FL 33486 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: SCHNELLENGERGER, HOWARD
Address: 5109G N OCEAN BLVD
City-St-Zip: OCEAN RIDGE, FL 33435

Title: P ( ) Delete
Name: CANNING, BILL
Address: 5701A N OCEAN BLVD
City-St-Zip: OCEAN RIDGE, FL 33435

Title: D ( ) Delete
Name: DARCEY, MAUREEN
Address: 5109-B NORTH OCEAN BLVD
City-St-Zip: OCEAN RIDGE, FL 33435

Title: T ( ) Delete
Name: MACDONALD, JAMES
Address: 5105-A OCEAN BLDG
City-St-Zip: OCEAN RIDGE, FL 33435

Title: D ( ) Delete
Name: O'BRIEN, BOB
Address: 5103 D NORTH OCEAN BLVD
City-St-Zip: OCEAN RIDGE, FL 33435

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: D (X) Change ( ) Addition
Name: PLAIA, JAMES
Address: 5103 B NORTH OCEAN BLVD
City-St-Zip: OCEAN RIDGE, FL 33435

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: BILL CANNING P 04/22/2009

Electronic Signature of Signing Officer or Director — Date