## 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N04000001029

FILED May 07, 2009 Secretary of State

Entity Name: TURNBERRY ON THE GREEN CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 19501 WEST COUNTRY CLUB DRIVE AVENTURA, FL 33180 **Current Mailing Address: New Mailing Address:** 19501 WEST COUNTRY CLUB DRIVE MANAGEMENT OFFICE AVENTURA, FL 33180 FEI Number: 20-0675453 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: SIEGFRIED RIVERA LERNER TORRE & SOBEL MORGULIS, MIKHAIL 201 ALHAMBRA CIRCLE 19501 WEST COUNTRY CLUB DRIVE **SUITE 1102** AVENTURA, FL 33180 CORAL GABLES, FL 33134 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: MIKHAIL MORGULIS 05/07/2009 Electronic Signature of Registered Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **OFFICERS AND DIRECTORS: PRES** () Delete () Change () Addition ARZUMANOV, GREGORI Name: Name: 19501 W COUNTRY CLUB DR UNIT 608 Address: Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip: Title: () Delete Title: () Change () Addition BOREN, STEPHANIE Name: Name: Address: 19501 W COUNTRY CLUB DR UNIT 2302 Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip: Title: SECT () Delete Title: () Change () Addition BRAD, MITCHELL Name: Name: 19501 W COUNTRY CLUB DR UNIT 1711 Address: Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip: Title: DIR ( ) Delete Title: () Change () Addition VITON, MARIA Name: Name: 19501 W COUNTRY CLUB DR UNIT 411 Address: Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip: Title: **TRES** () Delete Title: () Change () Addition CABAN, KEN Name: Name: 19501 W COUNTRY CLUB DR UNIT 703 Address: Address: City-St-Zip: AVENTURA, FL 33180 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: ARZUMANOV GREGORY **PRES** 05/07/2009