

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011589

FILED  
Apr 08, 2011  
Secretary of State

**Entity Name:** TURTLE ROCK HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4798 SOUTH FLORIDA AVE., #106  
LAKELAND, FL 338132181

**New Principal Place of Business:**

4798 SOUTH FLORIDA AVE., #106  
LAKELAND, FL 33813 US

**Current Mailing Address:**

4798 SOUTH FLORIDA AVE., #106  
LAKELAND, FL 338132181

**New Mailing Address:**

4798 SOUTH FLORIDA AVE., #106  
LAKELAND, FL 33813 US

**FEI Number:** 41-2189069

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

STEWART, JAMES (JIM)  
4798 S FLORIDA AVE #106  
LAKELAND, FL 338132181 US

**Name and Address of New Registered Agent:**

STEWART, JAMES (JIM)  
4798 S FLORIDA AVE #106  
LAKELAND, FL 33813 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:

04/08/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DV  
Name: ESPIE, RICK  
Address: 4798 S. FLORIDA AVENUE #106  
City-St-Zip: LAKELAND, FL 33813 US

Title: DP  
Name: SOLARY, MICHAEL  
Address: 4798 S FLORIDA AVE #106  
City-St-Zip: LAKELAND, FL 33813 US

Title: DST  
Name: STEWART, JAMES (JIM)  
Address: 4798 S. FLORIDA AVENUE #106  
City-St-Zip: LAKELAND, FL 33813 US

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL SOLARY

DP

04/08/2011

Electronic Signature of Signing Officer or Director

Date