

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jun 07, 2007
Secretary of State**

DOCUMENT# N05000005605

Entity Name: TURN-AROUND BAY CONSERVATION CLUB, INC.

Current Principal Place of Business:

5675 WILLOWBY DRIVE
MELBOURNE, FL 32930

New Principal Place of Business:

Current Mailing Address:

5675 WILLOWBY DRIVE
MELBOURNE, FL 32930

New Mailing Address:

FEI Number: 20-2613024 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

TAYLOR, JAMES E JR
126 E JEFFERSON ST
ORLANDO, FL 32806 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: D () Delete
Name: CONNER, DOUG
Address: 5675 WILLOWBY DRIVE
City-St-Zip: MELBOURNE, FL 32930

Title: D () Delete
Name: MATONIS, STEVE
Address: 17 SOUTH MAGNOLIA AVENUE
City-St-Zip: ORLANDO, FL 32801

Title: D () Delete
Name: BISHOP, WILLIAM D
Address: 718 FAIROAKS LANE
City-St-Zip: MAITLAND, FL 32751

Title: D () Delete
Name: TAYLOR, JAMES E JR
Address: 126 E JEFFERSON ST
City-St-Zip: ORLANDO, FL 32801

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:

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: DOUGLAS E. CONNOR

PRES

06/07/2007

Electronic Signature of Signing Officer or Director

_____ Date