

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010808

FILED  
Apr 29, 2009  
Secretary of State

**Entity Name:** FLORIDA TURKISH CENTER FOUNDATION, INC.

**Current Principal Place of Business:**

17670 NW 78TH AVE.  
SUITE: 208  
PALM SPRINGS NORTH, FL 33015

**New Principal Place of Business:**

**Current Mailing Address:**

17670 NW 78TH AVE.  
SUITE: 208  
PALM SPRINGS NORTH, FL 33015

**New Mailing Address:**

**FEI Number:** 26-4125977

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ORNARLI, FUAT  
14360 NW 16TH STR.  
PEMBROKE PINES, FL 33028 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: P ( ) Delete  
Name: NUR, ERKAN  
Address: 10301 LEXINGTON ESTATES BLVD.  
City-St-Zip: BOCA RATON, FL 33428

Title: VP ( ) Delete  
Name: ORKAN, ATILLA  
Address: 1361 SOUTH OCEAN BLVD. #507  
City-St-Zip: POMPANO BEACH, FL 33062

Title: S ( ) Delete  
Name: ORNARLI, FUAT  
Address: 14360 NW 16TH STR.  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: T ( ) Delete  
Name: ODABAS-YIGIT, SERAP  
Address: 2391 NW 49TH LN  
City-St-Zip: BOCA RATON, FL 33431

**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: FUAT ORNARLI

S

04/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date