## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## ---- FILED · · · · Apr 09, 2007 08:00 Al Secretary of State DOCUMENT # N13064 1, Entity Name TORTOISE VIEW VILLAS, CORP. Principal Place of Business Mailing Address 605 MANATEE DRIVE 609 MANATEE DRIVE SATELLITE BEACH FL 32937-3877 SATELLITE BEACH FL 32937-3877 2. Principal Place of Business - No P O. Box # · 3. Mailing Addross Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State City & Stato 4. FEI Number Applied For NO-T APPLICABLE Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MCCLAIN, ROBERT C. Street Address (P.O. Box Number is Not Acceptable) 1127 S. PATRICK DR. STE 2 SATELLITE BEACH FL 32937 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Pavable to **\$5.00** May Be Trust Fund Contribution Due By May 1, 2007 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. U00000694595 Change PD Delete THEE. THE Addition NAMI NAME MONTGOMERY, DAVID 04/17/07-80025-021 61.25 STREET ADDRESS 608 MANATEE DR STREET ADDRESS CITY-ST-ZIP SATELLITE BEACH FL 32937 CITY-ST-7IP MILE ☐ Detete Change ☐ Addition THILE NAMÉ MARLENE SCHAAFSMA NAMI STREET ADDRESS 609 MANATEE DRIVE STREET ADDRESS CITY-ST-ZIP CHY-St-7IP SATELLITE BEACH FL ☐ Delete TIME HUE ☐ Change ☐ Addition NAME SEAMONDS, DERRAINE NAME STREET ADDRESS STREET ADDRESS 611 MANATEE DR CITY-ST-ZIP CITY-ST-7IP SATELLITE BEACH FL 32937 THE Change ☐ Addition ☐ Delete TITLE D NAME NAME SMITH, JO STREET ADDRESS STREET ADDRESS **604 MANATEE DR** CITY-ST-7IP CHY-ST-ZIP SATELLITE BEACH FL 32937 TITLE ☐ Delete HILE Change Addition NAME SEAMONDS, CHARLES NAME STREEL ADDRESS 611 MANATEE DR STREET ADDRESS CITY-ST-ZIP SATELLITE BEACH FL 32937 CITY-ST-ZIP THE ☐ Delete DHE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes, I further certify that the information

indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE** 

MA- MARIENE SCHAATSMA 4/

4/4/2007 321-779-309