

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35251

FILED
Apr 11, 2007
Secretary of State

Entity Name: GREEN TURTLE BEACH HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O JANET SWANTON
127 SEASHORE DR.
ISLAMORADA, FL 33036 US

New Principal Place of Business:

C/O DIXIE HUMELSINE
120 SEASHORE DR.
ISLAMORADA, FL 33036 US

Current Mailing Address:

C/O JANET SWANTON
127 SEASHORE DR.
ISLAMORADA, FL 33036 US

New Mailing Address:

C/O DIXIE HUMELSINE
120 SEASHORE DR.
ISLAMORADA, FL 33036 US

FEI Number: 65-0064103

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SWANTON, JANET
127 SEASHORE DR.
ISLAMORADA, FL 33036 US

Name and Address of New Registered Agent:

HUMELSINE, MARY
120 SEASHORE DR.
ISLAMORADA, FL 33036 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: MARY HUMELSINE

04/11/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COCKERHAM, MARK
Address: 108 SEASHORE DR
City-St-Zip: ISLAMORADA, FL

Title: T () Delete
Name: ENGLISH, JANET
Address: 127 SEASHORE DR.
City-St-Zip: ISLAMORADA, FL 33036

Title: S (X) Delete
Name: TUDOR, CARRIE
Address: 133 SEASHORE DR.
City-St-Zip: ISLAMORADA, FL 33036

Title: T (X) Delete
Name: TUDOR, CARRIE
Address: 133 SEASHORE DR
City-St-Zip: ISLAMORADA, FL 33036

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: COCKERHAM, MARK
Address: 108 SEASHORE DR
City-St-Zip: ISLAMORADA, FL 33036

Title: T/S (X) Change () Addition
Name: HUMELSINE, MARY
Address: 120 SEASHORE DR
City-St-Zip: ISLAMORADA, FL 33036

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 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: MARY HUMELSINE

T/S

04/11/2007

Electronic Signature of Signing Officer or Director

Date