

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 17, 2008
Secretary of State

DOCUMENT# N36515

Entity Name: TURTLE LAKES UNIT 5 HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**24203 DRACENA CT
LUTZ, FL 33559 US**New Principal Place of Business:**1518 NORWICK DRIVE
LUTZ, FL 33559 US**Current Mailing Address:**24203 DRACENA CT
LUTZ, FL 33559 US**New Mailing Address:**1518 NORWICK DRIVE
LUTZ, FL 33559 US**FEI Number:** 59-3140089**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BOLACK, RICHARD
24203 DRACENA CT
LUTZ, FL 33559 US**Name and Address of New Registered Agent:**GRAHAM, ROBERT
1518 NORWICK DRIVE
LUTZ, FL 33559 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: ROBERT GRAHAM

06/17/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: MATTIELLO, AURELIO
Address: 24119 HAMPTON PLACE
City-St-Zip: LUTZ, FL 33559

Title: PD () Delete
Name: BOLACK, RICHARD
Address: 24203 DRACENA CT
City-St-Zip: LUTZ, FL 33559

Title: TD () Delete
Name: BOLACK, ELAINE
Address: 24203 DARCENA CT
City-St-Zip: LUTZ, FL 33559

Title: SEC () Delete
Name: GUASP, JOHN
Address: 24204 HAMPTON PL
City-St-Zip: LUTZ, FL 33559

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MATTIELLO, AURELIO
Address: 24119 HAMPTON PLACE
City-St-Zip: LUTZ, FL 33559

Title: DT (X) Change () Addition
Name: MORROW, DORY
Address: 1440 NORWICK DRIVE
City-St-Zip: LUTZ, FL 33559

Title: D (X) Change () Addition
Name: SHAFFER, MARGARET
Address: 24204 HAMPTON DR
City-St-Zip: LUTZ, FL 33559

Title: D (X) Change () Addition
Name: IOSUE, JOANNA
Address: 24149 HAMPTON PL
City-St-Zip: LUTZ, FL 33559

Title: P () Change (X) Addition
Name: GRAHAM, ROBERT
Address: 1518 NORWICK DRIVE
City-St-Zip: LUTZ, FL 33559

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: ROBERT GRAHAM

P

06/17/2008

Electronic Signature of Signing Officer or Director

Date