## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39129

FILED Apr 09, 2010 Secretary of State

Entity Name: TURTLE CREEK UNITS THREE AND FOUR ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2180 WEST SR 434, STE 5000 LONGWOOD, FL 327795044

Current Mailing Address: New Mailing Address:

2180 WEST SR 434, STE 5000 LONGWOOD, FL 327795044

FEI Number: 59-3061598 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HART, JAMES W JR SENTRY MANAGEMENT INC 2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 32779 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Γitle: VPD

Name: KINNEMAN, STAN
Address: 2271 CHRISTY LN
City-St-Zip: OLDSMAR, FL 34677

Title: PD

 Name:
 KILLEN, DESMOND

 Address:
 4900 TURTLE CREEK TRL

 City-St-Zip:
 OLDSMAR, FL 34677

Title: SD

Name: WATERS, CAROL
Address: 4932 TURTLE CREEK TRL
City-St-Zip: OLDSMAR, FL 34677

Title: TD

Name: BITNER, WILLIAM

Address: 4902 TURTLE CREEK TRL City-St-Zip: OLDSMAR, FL 34677

Title: D

Name: RAMOS, MARGARITA Address: 4886 BRIDLE CT City-St-Zip: OLDSMAR, FL 34677

I hereby 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 all other like empowered.

SIGNATURE: DESMOND KILLEN PD 04/09/2010