2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 03, 2007 8:00 am
Secretary of State
08-03-2007 90019 022 ****61.25

DOCUMENT # N41514

1. Entity Name
TURTLE BAY HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1978 ROCKLEDGE BLVD SUITE 106 ROCKLEDGE, FL 32955	1978 ROCKLEDGE BLVD SUITE 106 ROCKLEDGE, FL 32955

06192007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
P.O. Box 510404	P.O. Box 510404
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Melbourne Beach FL	City & State: Melbourne Beach FL
Zip: 32951 Country: BREVARD	Zip: 32951 Country: BRVARD

4. FEI Number 59-3137974 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ADVANCE PROPERTY MGMT. 6767 N WICKHAM RD, STE 213 MELBOURNE, FL 32940	Name: BILL OSMUN (PRESIDENT) Street Address (P.O. Box Number is Not Acceptable): 207 LOGGERHEAD DR City: melbourne BEACH FL Zip Code: 32951

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: X BILL OSMUN (PRESIDENT) X X DATE: X 6/25/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HARRISON, ED 267 LOGGERHEAD DR MELBOURNE BEACH, FL 32951	☒ Delete	PD BILL OSMUN 207 LOGGERHEAD DR. MELBOURNE BEACH FL 32951	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CARUSO, EVA 250 LOGGERHEAD DR MELBOURNE BEACH, FL 32951	☐ Delete	SECRETARY EVA CARUSO 250 LOGGERHEAD DR melbourne Beach FL 32951	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LEHR, DAVID 204 LOGGERHEAD DR MELBOURNE BEACH, FL 32951	☒ Delete	DIRECTOR LOIS CARUANA 227 LOGGERHEAD DR MELBOURNE BEACH FL 32951	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD PAWTOWSKI, FRANCIS 215 LOGGERHEAD DR. MELBOURNE BEACH, FL 32951	☒ Delete	TREASURER JUDY GALLAGHER 4833 TERRAPIN CT MELBOURNE BEACH FL 32951	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD BRAGDON, CLIFFORD R 228 LOGGERHEAD DR MELBOURNE BEACH, FL 32951	☒ Delete	VICE PRES DOMINIC MINERVA 239 LOGGERHEAD DR Melbourne BEACH FL 32951	☒ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change	☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X 6/25/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #