

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N49601

1. Entity Name
**GREATER-AVENTURA - TURNBERRY CITIZENS
ASSOCIATION, INC.**



Principal Place of Business
**20100 W COUNTRY CLUB DR
#202
AVENTURA, FL 33180**

Mailing Address
**P.O. BOX 800143
AVENTURA, FL 33280**

FILED

05 JUN 10 PM 4:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05202005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

**GROSSMAN, GINGER
20100 W COUNTRY CLUB DR
APT 202
AVENTURA, FL 33180**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 7, 2005**

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

TITLE PD ☐ Delete
NAME GROSSMAN, GINGER
STREET ADDRESS 20100 W COUNTRY CLUB DR #202
CITY-ST-ZIP AVENTURA, FL 33180

TITLE VD ☐ Delete
NAME GROSSMAN, ARTHUR
STREET ADDRESS 20100 W COUNTRY CLUB DR #202
CITY-ST-ZIP AVENTURA, FL 33180

TITLE SD ☐ Delete
NAME ZELLER, ALLEN
STREET ADDRESS 2149 SW 30TH CT
CITY-ST-ZIP MIAMI, FL 33145

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
**100056149031
06/14/05--01034--006 **\$61.25**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **ZELLER, ALLEN**
STREET ADDRESS **6932 SUNSET COURT**
CITY-ST-ZIP **MIAMI BEACH, FL 33133**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Ginger S. Grossman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

GINGER S. GROSSMAN-6/14/05 932-0042