

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N51136

**FILED**  
**Apr 01, 2010**  
**Secretary of State**

**Entity Name:** TURQUOISE AT SAPPHIRE LAKES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O RESORT MANAGEMENT  
2685 HORSESHOE DRIVE SOUTH STE#215  
NAPLES, FL 34104 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O RESORT MANAGEMENT  
2685 HORSESHOE DRIVE SOUTH STE#215  
NAPLES, FL 34104 US

**New Mailing Address:**

**FEI Number:** 65-0393148

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MORRISON, JOHN  
185 GABRIEL CIRCLE  
#2903  
NAPLES, FL 34104 US

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

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:**

**Title:** ST  
**Name:** MORRISON, JOHN  
**Address:** 185 GABRIEL CIRCLE #2903  
**City-St-Zip:** NAPLES, FL 34104

**Title:** VP  
**Name:** DEENEY, JACK  
**Address:** 249 GABRIEL CIRCLE #2704  
**City-St-Zip:** NAPLES, FL 34104

**Title:** P  
**Name:** VELLA, MARIAN  
**Address:** 217 GABRIEL CIRCLE #2809  
**City-St-Zip:** NAPLES, FL 34104

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:** MARIAN VELLA

P

04/01/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date