2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000807

Apr 17, 2009 Secretary of State

Entity Name: TURNBERRY PLACE AT BLUEWATER BAY PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 4400 HIGHWAY 20 E SUITE 312 NICEVILLE, FL 32578 US **New Mailing Address: Current Mailing Address:** P O BOX 5263 NICEVILLE, FL 32578 US FEI Number: 59-3170211 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: LANDSBERGER, DARLANE 4400 HIGHWAY 20 E SUITE 312 NICEVILLE, FL 32578 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition AYLOR, VIRGIL BUD O'NEIL, STEVE Name: Name: 4435 TURNBERRY PLACE Address: 4441 TURNBERRY PLACE Address: City-St-Zip: NICEVILLE, FL 32578 US City-St-Zip: NICEVILLE, FL 32578 US (X) Change () Addition VD () Delete Title: REMINGTON, VICKI Name: REMINGTON, VICKI Address:

Title: Name: Address: 4449 TURNBERRY PLACE City-St-Zip: NICEVILLE, FL 32578 US

Title: () Delete TATUM-JONES, SHARON Name: 4438 TURNBERRY PLACE Address: City-St-Zip: NICEVILLE, FL 32578 US

Title: SD () Delete Name: HADFIELD, LARRY

4475 TURNBERRY PLACE Address: City-St-Zip: NICEVILLE, FL 32578 US

Title: (X) Delete O'NEILL, STEVE Name:

4441 TURNBERRY PLACE Address: City-St-Zip: NICEVILLE, FL 32578 US

4449 TURNBERRY PLACE City-St-Zip: NICEVILLE, FL 32578 US Title: (X) Change () Addition TATUM-JONES, SHARON Name: 4438 TURNBERRY PLACE Address: City-St-Zip: NICEVILLE, FL 32578 US Title: () Change () Addition Name: Address:

Title: () Change () Addition

Name: Address: City-St-Zip:

City-St-Zip:

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: STEVE O'NEIL PD 04/17/2009