2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 31, 2005 8:00 am Secretary of State

DOCUMENT # N9300003910 1. Entity Name HARBOR ISLAND AT TURTLE RUN HOMEOWNERS ASSOCIATION, INC.								01-31-2005	900 65 0	20 ****6	1.25
Principal Place of Business 7932 WILES RD CORAL SPRINGS, FL 33067 US			Mailing Address C/O BENCHMARK PROP MGMT 7932 WILES RD CORAL SPRINGS, FL 33067			us		1 8102 18 11 58 1 18 1			
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			· ·	01172005	Chg-NP	CR2E0	37 (10/03)	
City & State			City & State				4. FEI Numbe 65-0561				pplied For
Zip	Country		Zip	Zip Cou		untry	5. Certificate of Status Desired			\$8.75 Add Fee Require	ditional
	6. Name	and Address of Current	Registered	Agent			7. Name and	Address of New R	egistered	Agent	A-
COLUMED	LADDY					Name Pag	K		_1		
SCHNER, LARRY 750 S DIXIE HWY						Street Address (P.O. Box Number is Not Acceptable) 6261 NW WAY					
BOX 3004 BOCA RATON, FL 33432							te 103				
						City H	FL Landerdala FL Zip Code 33309				
8. The above the obligat	named entity ions of regist	v submits this statement fo ered agent.	r the purpos	e of changing its r	egistere	ed office or registe	ered agent, or both	n, in the State of Flo	orida. I am	familiar with,	and accept
		1 G	·								
SIGNATURE.		or printed name of registered agent	.171 Aug. 3						0.175		
70 (o grand, typeo	or printed rame or registered agent.	and title if applica	ble. (NOTE:	Registere	d Agent signature require	ed when reinstating)	• • • • • • • • • • • • • • • • • • • •	DATE		
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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 ampowered 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 lar address, with all other like empowered.

SIGNATURE:

OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

117/05

954-344-5353 Daytime Prone #