## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

N93000004006 (3)

Mailing Address

TURTLE HILL LANDOWNERS ASSOCIATION, INC.

C/O FRANCIS V. GAY 8601 VERIDIAN DRIVE ORLANDO FL 32810			C/O FRANCIS V. GAY 8601 VERIDIAN DRIVE ORLANDO FL 32810-1742					
						3. Date incorporated or Qualified 08/27/1993	3a. Date of Las 03/01/	t Report <b>1996</b>
2. Principal Place of Business			2a. Mailing Address		4. FEI Number 59-3234723		Applied For	
21 Cuite And the cur			26		08-0204120		Not Applicable	
22	Suite, Apt #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
l	City & State		City & State	<b>—</b>		6. Election Campaign Financing		00 May Be
23	Zip	Country	Zip	Country		Trust Fund Contribution		ed to Fees
24	ziβ	25	29	30	ıy	This corporation has liability for i     Florida Statutes	ntangible tax unde Yes 🔲 No	er s. 199.032,
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
				6	1 Name			
	GAY, ROBERT A					dess (O.O. Day Number to Net Assessable	1.3	
1385 WEST STATE ROAD 434				ľ	Street Address (P.O. Box Number is Not Acceptable)			
LONGWOOD FL 32750				ē	3			
					4 City		les 7	ip Code
				1	,		FL	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered								
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.								
SIGNATURE								
<u> </u>		Signature, typed or printed name of registered ager			gent signature rec	quired when reinstating)	DATE	
12		OFFICERS AND	DELETE	13.	: · · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFIC	EHS AND DIRECT	
ĺ	ME	GAY, FRANCIS V	veete	· ·				Re Norman
	EFT ADDRESS 8601 VERIDIAN DRIVE			1.2 NAM				
	ON ANDO EL COCAO			1.3 STREET ADDRESS 1.4 CITY - ST - ZIP				
	TY-ST-ZIP LE			2,1 TITU			☐ Chan	ge Addition
1	ME GAY, ROBERT A			2.2 NAM				
1	REET ADDRESS	1385 W. STATE ROAD 434, S	UITE 102-B		ET ADDRESS			
1	Y-ST-ZIP	LONGWOOD FL 32750			-ST-ZIP			
_	LE	D DELETE		3.1 TITE		**************************************	Chan	ge Addition
NA	ME	SAYRE, ROBERT J		3.2 NAME				
ST	REET ADDRESS	1840 TURTLE HILL ROAD		3.3 STRE	ET ADDRESS			
CII	IY-ST-ZIP	ENTERPRISE FL 32763		3.4. CITY	- ST - ZIP			
TIT	LE		☐ DELETE	4.1 TITLE			☐ Chan	ge Addition
NA.	ME			4. 2 NAA	NE .			
12	REET ADORESS			4.3 STRE	ET ADDRESS			
CI	Y-ST-ZIP			4.4 CITY	-ST-ZIP			
TIT	LE		L. DELETE	5.1 <b>T</b> (TL)			Chan	ge Addition
NA	ME			5.2 NAM	E			
ST	REET ADORESS			5.3 STRE	ET ADDRESS			
_	IY-ST-ZIP		T proper		-ST-ZIP		1 1 A	
	LE			6.1 TITLI			L. Chan	ge 🔲 Addition
	ME			6.2 NAM				
	REET ADDRESS			*	ET ADDRESS			
$\overline{}$	IY-ST-ZIP	u cartify that the information associate	with this filing does not such		-ST-ZIP	and in Spotion 119 D7/2V// Florida Ciatata	a I further confirmal	hat the
14. I do 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 pinnual report or supplemental annual 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 of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or thock 13 if changed, or op an attack ment with an address.								

407 243-8447 Daytime Phone # 0017096

**FILED** 

Mar 11 1997 8:00am

Secretary of State