## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000002746

FILED Jan 30, 2009 Secretary of State

Entity Name: TURNBURY VILLAGE HOMEOWNERS' ASSOCIATION, INC.

Gurrent F	Principal Place	e of Business:	New Principal Place	e of Business:
	STON TRAILS PRTH, FL 3346			
Current N	/lailing Addre	ss:	New Mailing Addre	ss:
	STON TRAILS PRTH, FL 3346			
FEI Number	r: 65-0509526	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of (	Current Registered Agent:	Name and Address	of New Registered Agent:
1601 FOR SUITE 70 WEST PA The above In the Stat	LM BEACH, F e named entity e of Florida.		purpose of changing its register	ed office or registered agent, or both,
SIGNATU		ois Oissantons of Designation of Ass		Det
	Hectro	nic Signature of Registered Ag	ent	Date
OFFICER	S AND DIREC			GES TO OFFICERS AND DIRECTORS
OFFICER  Title:  Name:  Address:  City-St-Zip:	PD ( SOFIA, GENE 6120 ROYAL E	CTORS:		
Title: Name: Address: Dity-St-Zip: Title: Name: Address:	PD ( SOFIA, GENE 6120 ROYAL E LAKE WORTH  VD ( ALBERT, EUG 6035 ROYAL E	CTORS:  ) Delete  BIRKDALE  , FL 33463 US  ) Delete  ENE	ADDITIONS/CHANG Title: Name: Address:	SES TO OFFICERS AND DIRECTOR
Γitle: Name: Address:	PD ( SOFIA, GENE 6120 ROYAL E LAKE WORTH  VD ( ALBERT, EUG 6035 ROYAL E LAKE WORTH	Delete BIRKDALE , FL 33463 US ) Delete ENE BIRKDALE , FL 33463 US ) Delete LNE DIRKDALE , FL 33463 US ) Delete LN R COCK LANE	ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	GES TO OFFICERS AND DIRECTORS  ( ) Change ( ) Addition
Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Address:	PD ( SOFIA, GENE 6120 ROYAL E LAKE WORTH  VD ( ALBERT, EUG 6035 ROYAL E LAKE WORTH  ST ( JOYNER, COL 6313 SHINNEC LAKE WORTH	Delete BIRKDALE , FL 33463 US ) Delete ENE BIRKDALE , FL 33463 US ) Delete LIN R COCK LANE , FL 33463 ) Delete I, ROGER BIRKDALE DR.	ADDITIONS/CHANC Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: City-St-Zip:	GES TO OFFICERS AND DIRECTORS  ( ) Change ( ) Addition  ( ) Change ( ) Addition

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: GENE SOFIA P 01/30/2009