

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2007 8:00 am
Secretary of State

01-17-2007 90050 049 ****61.25

DOCUMENT # N96000001366 1. Entity Name TURNING HAWK RANCH UNIT 2 HOMEOWNERS ASSOCIATION, INC.																																																																																																																	
Principal Place of Business 1640 SE 91ST PLACE OCALA, FL 34480 US			Mailing Address 1640 SE 91ST PLACE OCALA, FL 34480 US																																																																																																														
2. Principal Place of Business - No P.O. Box #		3. Mailing Address																																																																																																															
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																															
City & State		City & State		4. FEI Number 65-0729621																																																																																																													
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																																																																																																													
6. Name and Address of Current Registered Agent HALL, JACKIE 1640 SE 91ST PLACE OCALA, FL 34480				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____																																																																																																													
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Jackie Hall</i></u> Signature, typed or printed name of registered agent and title if applicable. <u>1-14-07</u> DATE																																																																																																																	
Filing Fee is \$81.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees																																																																																																													
Make check payable to Florida Department of State																																																																																																																	
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 10%;">D</td> <td style="width: 10%; text-align: center;">☒ Delete</td> <td style="width: 10%;">NAME</td> <td style="width: 10%;">FULLER, DAVID</td> <td style="width: 10%;">STREET ADDRESS</td> <td style="width: 10%;">9346 SE 7TH AVENUE ROAD</td> <td style="width: 10%;">CITY-ST-ZIP</td> <td style="width: 10%;">OCALA, FL 34480</td> </tr> <tr> <td>TITLE</td> <td>D</td> <td style="text-align: center;">☒ Delete</td> <td>NAME</td> <td>SIEBERT, GEORGE</td> <td>STREET ADDRESS</td> <td>1899 SE 91ST PLACE</td> <td>CITY-ST-ZIP</td> <td>OCALA, FL 34480</td> </tr> <tr> <td>TITLE</td> <td>D</td> <td style="text-align: center;">☐ Delete</td> <td>NAME</td> <td>HALL, JACKIE</td> <td>STREET ADDRESS</td> <td>1640 SE 91ST PLACE</td> <td>CITY-ST-ZIP</td> <td>OCALA, FL 34480</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Delete</td> <td>NAME</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Delete</td> <td>NAME</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Delete</td> <td>NAME</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td>CITY-ST-ZIP</td> <td></td> </tr> </table> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 10%;">PRESIDENT</td> <td style="width: 10%; text-align: center;">☒ Change ☐ Addition</td> <td style="width: 10%;">NAME</td> <td style="width: 10%;">DR. J.C. MITCHELL</td> <td style="width: 10%;">STREET ADDRESS</td> <td style="width: 10%;">9230 SE 7TH AVE. ROAD</td> <td style="width: 10%;">CITY-ST-ZIP</td> <td style="width: 10%;">OCALA, FL 34480</td> </tr> <tr> <td>TITLE</td> <td>BEERS, LORI</td> <td style="text-align: center;">☒ Change ☐ Addition</td> <td>NAME</td> <td></td> <td>STREET ADDRESS</td> <td>1780 SE 91ST PLACE</td> <td>CITY-ST-ZIP</td> <td>OCALA, FL 34480</td> </tr> <tr> <td>TITLE</td> <td>OLIVER, CINDY</td> <td style="text-align: center;">☒ Change ☐ Addition</td> <td>NAME</td> <td></td> <td>STREET ADDRESS</td> <td>1701 SE 91ST PLACE</td> <td>CITY-ST-ZIP</td> <td>OCALA, FL 34480</td> </tr> <tr> <td>TITLE</td> <td>HALL, M. BRUCE</td> <td style="text-align: center;">☒ Change ☐ Addition</td> <td>NAME</td> <td></td> <td>STREET ADDRESS</td> <td>1640 SE 91ST PLACE</td> <td>CITY-ST-ZIP</td> <td>OCALA, FL 34480</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Change ☐ Addition</td> <td>NAME</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;">☐ Change ☐ Addition</td> <td>NAME</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td>CITY-ST-ZIP</td> <td></td> </tr> </table>						TITLE	D	☒ Delete	NAME	FULLER, DAVID	STREET ADDRESS	9346 SE 7TH AVENUE ROAD	CITY-ST-ZIP	OCALA, FL 34480	TITLE	D	☒ Delete	NAME	SIEBERT, GEORGE	STREET ADDRESS	1899 SE 91ST PLACE	CITY-ST-ZIP	OCALA, FL 34480	TITLE	D	☐ Delete	NAME	HALL, JACKIE	STREET ADDRESS	1640 SE 91ST PLACE	CITY-ST-ZIP	OCALA, FL 34480	TITLE		☐ Delete	NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE		☐ Delete	NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE		☐ Delete	NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE	PRESIDENT	☒ Change ☐ Addition	NAME	DR. J.C. MITCHELL	STREET ADDRESS	9230 SE 7TH AVE. ROAD	CITY-ST-ZIP	OCALA, FL 34480	TITLE	BEERS, LORI	☒ Change ☐ Addition	NAME		STREET ADDRESS	1780 SE 91ST PLACE	CITY-ST-ZIP	OCALA, FL 34480	TITLE	OLIVER, CINDY	☒ Change ☐ Addition	NAME		STREET ADDRESS	1701 SE 91ST PLACE	CITY-ST-ZIP	OCALA, FL 34480	TITLE	HALL, M. BRUCE	☒ Change ☐ Addition	NAME		STREET ADDRESS	1640 SE 91ST PLACE	CITY-ST-ZIP	OCALA, FL 34480	TITLE		☐ Change ☐ Addition	NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE		☐ Change ☐ Addition	NAME		STREET ADDRESS		CITY-ST-ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																																																																																	
SIGNATURE: <u><i>Jackie Hall</i></u> JACKIE HALL , <u>1-14-07</u> <u>312-873-1316</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																																																																																																	

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