

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002209

FILED  
Feb 12, 2009  
Secretary of State

Entity Name: TURNBERRY OWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

12273 U.S. HWY 98  
SUITE 2D8  
MIRAMAR BEACH, FL 32550 US

## New Principal Place of Business:

## Current Mailing Address:

12273 U.S. HWY 98  
SUITE 2D8  
MIRAMAR BEACH, FL 32550 US

## New Mailing Address:

FEI Number: 59-3387580

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STARNES, JIM  
12273 U.S. HWY 98  
SUITE 208  
DESTIN, FL 32550 US

## Name and Address of New Registered Agent:

LEIRER, WALT  
12273 U.S. HWY 98  
SUITE 208  
DESTIN, FL 32550 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: WALT LEIRER

02/12/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D (X) Delete  
Name: WILKIN, HOWARD  
Address: 475 HUNTERS CROSSING DR.  
City-St-Zip: ATLANTA, GA 30328 US

Title: P ( ) Delete  
Name: MICHIE, SCOTT  
Address: 8602 MAGNOLIA BAY  
City-St-Zip: MIRAMAR BEACH, FL 32550 US

Title: DV ( ) Delete  
Name: FARRUGIA, CHRIS  
Address: 4510 BAYBROOK DR  
City-St-Zip: PENSACOLA, FL 32514 US

Title: T ( ) Delete  
Name: FINNELL, RUDOLPH  
Address: 9515 MOUTAINLAKE DR.  
City-St-Zip: OOLTEWAH, TN 37363

Title: S ( ) Delete  
Name: DALRI, JOHN  
Address: 3806 SHADY MEADOW DR  
City-St-Zip: GRAPEVINE, TX 76051

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: LES NICHOLS

CAM

02/12/2009

Electronic Signature of Signing Officer or Director

Date