2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006232

FILED Mar 07, 2007 Secretary of State

Entity Name: TURTLE WALK CONDOMINIUM OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:		
167 ABAL		ASSOCIATES I, FL 32548		
Current Mailing Address:		ss:	New Mailing Address:	
167 ABAL		ASSOCIATES I, FL 32548		
El Number	: 63-1183713	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of (Current Registered Agent:	Name and Address of	of New Registered Agent:
348 MIRA SUITE 7	I,JR., RAYMON CLE STRIP PA ALTON BEACH			
		submits this statement for the	purpose of changing its registere	ed office or registered agent, or both
n the Stat	e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both
	e of Florida. RE:	submits this statement for the nic Signature of Registered Ag		ed office or registered agent, or both
n the Stat SIGNATU	e of Florida. RE:	nic Signature of Registered Ag	ent	
n the Stat SIGNATU DFFICER Title: Name: Address:	e of Florida. RE: Electron S AND DIREC	nic Signature of Registered Ag T ORS:) Delete ALD IYON RD.	ent	Date
n the Stat SIGNATU	e of Florida. RE: Electron S AND DIRECTON PD (FISHER, DONA 2603 BOX CAN HUNTSVILLE, A	nic Signature of Registered Age FTORS:) Delete ALD JYON RD. AL 35803) Delete SALLIE OVE	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO
n the Stat BIGNATU DFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	e of Florida. RE: Electrol S AND DIRECT PD (FISHER, DON/ 2603 BOX CAN HUNTSVILLE, AND TD (BIRMINGHAM, 3930 BIMINI C DULUTH, GA 3 D (WEATHERSBY UNIT 502 467 A	nic Signature of Registered Age FTORS:) Delete ALD JYON RD. AL 35803) Delete SALLIE OVE 800965272) Delete 7, FRANK	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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: DEBBIE FOWNER MGR 03/07/2007