

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006232

FILED  
Feb 03, 2011  
Secretary of State

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

**Current Principal Place of Business:**

467 ABALONE CT  
FORT WALTON BEACH, FL 32548

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2613  
FORT WALTON BEACH, FL 32549

**New Mailing Address:**

**FEI Number:** 62-1785431

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NEWMAN, JR., RAYMOND F  
348 MIRACLE STRIP PARKWAY S W  
SUITE 7  
FORT WALTON BEACH, FL 32548 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GROGAN, KEN  
Address: 5236 LANTON CIRCLE  
City-St-Zip: GAINESVILLE,, GA 30504

Title: TD  
Name: BADGETT, CHARLIE  
Address: 5727 DENT CREEK TRL  
City-St-Zip: DALLAS, TX 75252

Title: D  
Name: BHAGAT, ARJUN  
Address: PO BOX 247  
City-St-Zip: SOUTH MILWAUKEE, WI 53172

Title: SD  
Name: FOWNER, ROBERT  
Address: 222 ECHO CIR  
City-St-Zip: FORT WALTON BEACH, FL 32548

I hereby 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 all other like empowered.

SIGNATURE: ROBERT FOWNER

SD

02/03/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date