## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000006333

Entity Name: TURNBERRY ASSOCIATION, INC.

FILED Mar 06, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Finicipal Flace of Dusiness.	New Fillicipal Flace of Dusiliess.

MAY MANAGEMENT SERVICES INC
475 WEST TOWN PLACE SUITE 116
SAINT AUGUSTINE, FL 32092 US

MAY MANAGEMENT SERVICES INC
475 WEST TOWN PLACE SUITE 112
SAINT AUGUSTINE, FL 32092 US

SAINT AUGUSTINE, FL 32092 US

Current Mailing Address: New Mailing Address:

C/O MAY MANAGEMENT 5455 A1A SOUTH SAINT AUGUSTINE, FL 32080 US

FEI Number: 59-3479118 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MAY MANAGEMENT SERVICES
5455 US HWY A1A S

MAY MANAGEMENT SERVICES
5455 A1A S

SAINT AUGUSTINE, FL 32080 US SAINT AUGUSTINE, FL 32080 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: ANNA MARKS 03/06/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: ST ( ) Delete Title: D (X) Change ( ) Addition

Name: SIDNEY, HALSEY
Address: 301 EDGE OF WOODS RD.

Name: SIDNEY, HALSEY
Address: 5455 A1A S

City-St-Zip: SAINT AUGUSTINE, FL 32092 City-St-Zip: SAINT AUGUSTINE, FL 32080

 $\label{eq:title: VP (X) Change (Y) Addition} Title: \qquad VP \qquad \qquad (X) \ Change \ (Y) \ Addition$ 

 Name:
 YORIO, CHARLES
 Name:
 YORIO, CHARLES

 Address:
 505 ELIS WAY
 Address:
 5455 A1A S

City-St-Zip: SAINT AUGUSTINE, FL 32092 City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: P ( ) Delete Title: P (X) Change ( ) Addition

Name: NAVIN, DAN Name: NAVIN, DAN

 Address:
 1257 PARADIYE POND RD.
 Address:
 5455 A1A S

 City-St-Zip:
 SAINT AUGUSTINE, FL 32092
 City-St-Zip:
 SAINT AUGUSTINE, FL 32080

Title: ( ) Delete Title: ST ( ) Change (X) Addition

 Name:
 Name:
 JAMES, ROLF

 Address:
 Address:
 5455 A1A S

City-St-Zip: City-St-Zip: ST AUGUSTINE, FL 32080

Title: ( ) Delete Title: D ( ) Change (X) Addition

Name: TALBERT, MICHAEL

Address: 5455 A1A S

City-St-Zip: City-St-Zip: ST AUGUSTINE, FL 32080

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: ROLF JAMES ST 03/06/2009