

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2008 8:00 am
Secretary of State

03-07-2008 90036 021 ****61.25

DOCUMENT # N99000003154 1. Entity Name GOLF VILLAS AT TURNBULL BAY I CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business P.O. BOX 373 NEW SMYRNA BEACH, FL 32170			Mailing Address P.O. BOX 373 NEW SMYRNA BEACH, FL 32170		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-3606971	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MORANO, JEAN 140 TURNBULL VILLAS CIRCLE NEW SMYRNA BEACH, FL 32168				7. Name and Address of New Registered Agent Name MARGARET R POWELL Street Address (P.O. Box Number is Not Acceptable) 138 TURNBULL VILLAS CIR. City NEW SMYRNA BEACH FL Zip Code 32168	
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>Margaret R Powell</i></u> DATE <u>3/5/08</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2008		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MERCURIO, DOMINIC 144 TURNBULL VILLAS CIRCLE NEW SMYRNA BEACH, FL 32168	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JANET MORGAN 118 TURNBULL VILLAS CIRCLE NEW SMYRNA BEACH, FL 32168	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LOETTERIE, RICHARD 134 TURNBULL VILLAS CIRCLE NEW SMYRNA BEACH, FL 32168	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JOEL SMITH 104 TURNBULL VILLAS CIRCLE NEW SMYRNA BEACH, FL 32168	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MORANO, JEAN 140 TURNBULL VILLAS CIRCLE NEW SMYRNA BEACH, FL 32168	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MARGARET POWELL 138 TURNBULL VILLAS CIRCLE NEW SMYRNA BEACH, FL 32168	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	☐ Change ☐ Addition
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>Margaret R Powell</i></u> MARGARET R POWELL SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date <u>3/2/08</u> Daytime Phone # <u>386-409-8986</u>		