

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2006 8:00 am
Secretary of State

04-14-2006 90142 010 ****61.25

DOCUMENT # N99000007187

1. Entity Name
**TURTLE POINTE AT WEST BAY CLUB CONDOMINIUM
ASSOCIATION, INC.**



Principal Place of Business
**SANDCASTLE COMMUNITY MGMT.
1719 TRADE CENTER WAY, #4
NAPLES, FL 34109**

Mailing Address
**P.O. BOX 8478
NAPLES, FL 34101-8478**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01182006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-3613790

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WINKLER, NANCY
1719 TRADE CENTER WAY
#4
NAPLES, FL 34109**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

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 PD ☐ Delete
NAME BROWN, ROBERT
STREET ADDRESS 19570 MARSH POINTE RUN #202
CITY-ST-ZIP ESTERO, FL 33928

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME LIBELL, CHARLES
STREET ADDRESS 19530 MARSH POINTE RUN, #202
CITY-ST-ZIP ESTERO, FL 33928

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Delete
NAME VAN WAGONER, JAMES
STREET ADDRESS 19520 MARSH POINTE RUN # 201
CITY-ST-ZIP ESTERO, FL 33928

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME NARATIL, THOMAS
STREET ADDRESS 4895 MARSH TUILE TRAIL # 201
CITY-ST-ZIP ESTERO, FL 33928

TITLE TD ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☒ Delete
NAME RODE, BOB
STREET ADDRESS 19520 MARSH POINTE RUN, #202
CITY-ST-ZIP ESTERO, FL 33928

TITLE D ☐ Change ☒ Addition
NAME Donna M. Rodgers
STREET ADDRESS 4995 Marsh Turtle Trail #101
CITY-ST-ZIP Estero, FL 33928

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *Thomas A. Naratil* **THOMAS A. NARATIL**

4/12/06 **239-596-7200**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #