2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 26, 2007 8:00 am Secretary of State

DOCUMENT # N9900007187 1. Entity Name TURTLE POINTE AT WEST BAY CLUB CONDOMINIUM ASSOCIATION, INC.								04-26-200	7 90228 017 ***	*61.25	
Principal Place of Business SANDCASTLE COMMUNITY MGMT. 1719 TRADE CENTER WAY, #4 NAPLES, FL 34109 Mailing Address P.O. BOX 8478 NAPLES, FL 34101-84					478		3000	- 1 (8) 31(61(11)	:	187fal al 1831	
2. Principal Place of Business - No P.O. Box #			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				03222007 Chg-NP CR2E037 (12/06)				
City & State			City & State				4. FEI Number 59-36137	90	 	pplied For lot Applicable	
Zip	Zip Country		Zip		Co	Country 5. Certificate		Status Desired	\$8.75 A		
	6. Name	and Address of Current I	Register	ed Agent	-	Mamo	7. Name and Ad	Idress of New F	Registered Agent		
WINKLER 1719 TRAI #4 NAPLES, I	DE CENTE	ER WAY					CL Thomas (P.O. Box Number is 1012 (Inter		Indoode Comi H-4	nunity HBMT	
8. The above	named entity	y submits this statement for	the purp	pose of changing its	register	City City City City City City City City	5 ered agent, or both, i	n the State of Fl	FL Zip Co orida. I am familiar with	<i>09</i>	
SIGNATURE	1	or printed name of registered agents		otrophia (NO)	F. O	ed Agent signature requi		04-	24-07		
Filing Fee is \$61.25 9. Election Camp Due by May 1, 2007 Trust Fund Co					npaign l		9\$5.00 May Be Make check payable to				
10.	·	OFFICERS AND DIF	ECTORS	5	11.		ADDITIONS/CHANG	GES TO OFFICE	RS AND DIRECTORS	N 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		ROBERT ARSH POINTE RUN #20 FL 33928)2	☐ Delete		-			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Delete LIBELL, CHARLES 19530 MARSH POINTE RUN, #202 ESTERO, FL 33928								☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	19520 MA	SONER. JAMES RSH POINTE RUN # 2 FL 33928	01	☐ Detete					☐ Change	Addition ,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	4895 MAF	THOMAS RSH TUILE TRAIL # 20° FL 33928	l	□ Đ ele te					Change	Addition	
TITLE	D			☐ Delete	TITU	AE .			☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	4995 MAF	S, DONNA M RSH TURTLE TR #101 FL 33928				EET ADDRESS Y-ST-ZIP					
STREET ADDRESS	4995 MAF	RSH TURTLE TR #101		☐ Delete	CITY TITL NAM STR	Y-SI-ZIP			☐ Change	Addition	

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/07

TREASURED
Daytime Phone #