## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000007187

FILED Apr 01, 2009 Secretary of State

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

**Current Principal Place of Business: New Principal Place of Business:** 

SANDCASTLE COMMUNITY MGMT. 1719 TRADE CENTER WAY, #4 NAPLES, FL 34109

**New Mailing Address: Current Mailing Address:** 

P.O. BOX 8478 NAPLES, FL 341018478

FEI Number: 59-3613790 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:

THOMAS, BRAD C/O SANDCASTLE COMMUNITY MGMT 1719 TRADE CENTER WAY #4 NAPLES, FL 34109 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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete BROWN, ROBERT RODGERS, DONNA M Name: Name: 19570 MARSH POINTE RUN #202 Address: 4995 MARSH TURTLE TR #101 Address:

ESTERO, FL 33928 ESTERO, FL 33928

City-St-Zip: City-St-Zip:

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

LIBELL, CHARLES Name: LIBELL, CHARLES Name:

Address: 19530 MARSH POINTE RUN. #202 Address: 19530 MARSH POINTE RUN #202

City-St-Zip: ESTERO, FL 33928 City-St-Zip: ESTERO, FL 33928

Title: () Delete Title: () Change () Addition

VAN WAGONER, JAMES Name: Name: 19520 MARSH POINTE RUN # 201 Address: Address:

City-St-Zip: ESTERO, FL 33928 City-St-Zip:

(X) Change ( ) Addition Title: TD ( ) Delete Title: **VPTD** Name: NARATIL, THOMAS Name: NARATIL, THOMAS

4895 MARSH TUILE TRAIL # 201 4995 MARSH TURTLE TRAIL # 201 Address: Address:

City-St-Zip: ESTERO, FL 33928 City-St-Zip: ESTERO, FL 33928

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

RODGERS, DONNA M Name: Name: 4995 MARSH TURTLE TR #101 Address: Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip:

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: CHARLES LIBELL PD 04/01/2009