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Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90189 020 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000045231

1. Corporation Name

TURTLE CREEK PROPERTIES INCORPORATED



Principal Place of Business

121-123 FIFTH AVE
INDIALANTIC FL 32903

Mailing Address

121-123 FIFTH AVE
INDIALANTIC FL 32903

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/19/1997

4. FEI Number

APPLIED FOR

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes

☐

No

2. Principal Place of Business

21. 670 N COURTESY PKWY

Suite, Apt. #, etc.

22. Suite 17-B

City & State

23. MERRITT ISLAND

Zip

24. 32953

Country

25. Brevard

2a. Mailing Address

26. P O BOX 540941

Suite, Apt. #, etc.

27. Suite

City & State

28. MERRITT ISLAND FL

Zip

29. 32954

Country

30. Brevard

9. Name and Address of Current Registered Agent

BARLOW, T.M.
121-123 FIFTH AVE
INDIALANTIC FL 32903

10. Name and Address of New Registered Agent

81. Name

Ronald J. Lucas

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

670 N COURTESY PKWY

83.

Suite B17

84.

City MERRITT ISLAND

FL

85.

Zip Code 32953

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE:

Ronald J. Lucas

Ronald J. Lucas

Secretary/Treasurer

4/20/99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME HILL, MICHAEL G/O BARLOW, T.M.

STREET ADDRESS 123 FIFTH AVE

CITY-ST-ZIP INDIALANTIC FL 32903

TITLE SD ☐ DELETE

NAME SMITH, BRENT O/O BARLOW, T.M.

STREET ADDRESS 123 FIFTH AVENUE

CITY-ST-ZIP INDIALANTIC FL 32903

TITLE AS ☒ DELETE

NAME BARLOW, T.M.

STREET ADDRESS 123 FIFTH AVENUE

CITY-ST-ZIP INDIALANTIC FL 32903

TITLE TREASURER/Secretary ☐ DELETE

NAME RONALD J. LUCAS

STREET ADDRESS 670 N COURTESY PKWY #17B

CITY-ST-ZIP MERRITT ISLAND FL 32953

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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Change

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Addition

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ronald J. Lucas

Ronald J. Lucas

Treasurer

4/20/99

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)