

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003539

Entity Name: TURTLE BEACH CONDOMINIUM OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**12815 EMERALD COAST PARKWAY
SUITE 100
MIRAMAR BEACH, FL 32550**Current Mailing Address:**P.O. BOX 1779
DESTIN, FL 32540 US**FEI Number: 59-3403054****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NEWMAN-DAILEY RESORT PROPERTIES
12815 EMERALD COAST PARKWAY
SUITE 100
MIRAMAR BEACH, FL 32550 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: KEN WAMPLER****03/29/2018**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name KELLY, TIM
Address P.O. BOX 1779
City-State-Zip: DESTIN FL 32540

Title VICE PRESIDENT
Name WISNEWSKI, STEVE
Address P.O. BOX 1779
City-State-Zip: DESTIN FL 32540

Title DIRECTOR
Name HOLLOWAY, JEAN
Address P.O. BOX 1779
City-State-Zip: DESTIN FL 32540

Title PRESIDENT
Name WHITE, SCOTT
Address P.O. BOX 1779
City-State-Zip: DESTIN FL 32540

Title SECRETARY
Name HUNT, JULIA
Address P.O. BOX 1779
City-State-Zip: DESTIN FL 32540

Title DIRECTOR
Name BARNES, ANNE
Address P.O. BOX 1779
City-State-Zip: DESTIN FL 32540

Title TREASURER
Name WILLIAMS, TIM
Address P.O. BOX 1779
City-State-Zip: DESTIN FL 32540

I hereby 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 all other like empowered.

SIGNATURE: SCOTT WHITE**PRESIDENT****03/29/2018**

Electronic Signature of Signing Officer/Director Detail

Date