

A92000000248

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Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Turner Family Partnership, LTD., LLP
Statement of Qualification for Florida Limited Liability
Partnership

Dear Sir or Madam:

On behalf of the above-referenced partnership, enclosed please find an executed original and one photocopy of the Statement of Qualification for Florida Limited Liability Limited Partnership, and a check in the amount of \$25.00 representing the filing fee.

Please acknowledge filing of the enclosed document by date-stamping the enclosed copy and returning it to me in the self-addressed stamped envelope I am providing you with.

If you have any questions or require further information, please contact me by telephone before returning the documents.

Very truly yours,

Susan W. Carlson
Susan W. Carlson

SWC:lr
Enclosures
cc: Turner Family Partnership, LTD., LLP

FILED
01 JUN 20 AM 10:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATEMENT OF QUALIFICATION FOR FLORIDA
LIMITED LIABILITY LIMITED PARTNERSHIP

1. The name of the limited partnership as identified in the records of the Florida Department of State:

Turner Family Partnership, LTD., LLP

Insert Limited Partnership's Florida registration number: A92000000248

or

Attach certificate of limited partnership affidavit of capital contributions and applicable limited partnership filing fees

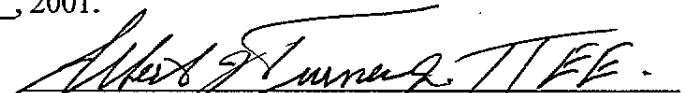
2. Suffix adopted for the above named partnership: LLP
("Registered Limited Liability Partnership," "Limited Liability Partnership," "R.L.L.P.," "L.L.P.," "RLLP," or "LLP")
3. The street address of its chief executive office:
(if different from current recorded address):
10089 Paradise Boulevard
Treasure Island, FL 33706
4. The street address of principal office in Florida:
(if different from above)
10089 Paradise Boulevard
Treasure Island, FL 33706
5. The limited partnership hereby elects to be a limited liability limited partnership.
6. The effective date of this filing shall be as of the date this document is filed with the Florida Secretary of State
7. The name and Florida street address of the limited partnership's agent for service of process:
Albert J. Turner, Jr.
10089 Paradise Boulevard
Treasure Island, FL 33706

FILED
01 JUN 20 AM 10:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

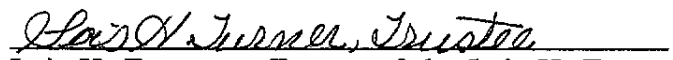
The execution of this statement as a partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Signed this 14 day of June, 2001.

Signature of Partner:


Albert J. Turner, Jr. as Trustee of the Albert J. Turner, Jr. Family Trust dated January 28, 1998, General Partner

Signature of Partner:


Lois H. Turner, as Trustee of the Lois H. Turner Family Trust dated January 28, 1998, General Partner