476 RIVERSIDE AVE. JACKSONVILLE, FL 32202 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	: ROBERT C TURNER			02/02/2024
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	Р	Title	V	
Name	TURNER, ROBERT C	Name	TURNER, MARY F	
Address	108 JULIENTON ISLAND DRIVE	Address	108 JULIENTON ISLAND DRIVE	E
City-State-Zip:	BRUNSWICK GA 31520	City-State-Zip:	BRUNSWICK GA 31520	
Title	ST			
Name	CREWS, CHERYL A			
Address	9251 BROWNTOWN ROAD			
City-State-Zip:	WAYNESVILLE GA 31566			

ONE SAINT ANDREWS COURT

## **Current Mailing Address:**

PO BOX 40 BRUNSWICK, GA 31521 US

## FEI Number: 65-1187320

## Name and Address of Current Registered Agent:

LEGALINC CORPORATE SERVICES INC 47 JA

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT TURNER

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

02/02/2024 Date

FILED Feb 02, 2024 Secretary of State 3580248516CC

Certificate of Status Desired: No

## 2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F1000000815

Entity Name: TURNER & ASSOCIATES INSURANCE, INC.

**Current Principal Place of Business:** 

SUITE 101 BRUNSWICK, GA 31520