

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 408845

FILED
May 05, 2008
Secretary of State

Entity Name: A-TURNER MOVING & STORAGE, INC.

Current Principal Place of Business:

1001 NW 53 AVE
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

1001 NW 53 AVE
GAINESVILLE, FL 32609

New Mailing Address:

FEI Number: 59-1412020

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TURNER, AARON
2735 NW 20 STREET
GAINESVILLE, FL 32606 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: TURNER, PATRICIA,
Address: 2735 NW 20 ST
City-St-Zip: GAINESVILLE, FL

Title: PD () Delete
Name: TURNER, AARON JR,
Address: 2735 NW 20 ST
City-St-Zip: GAINESVILLE, FL

Title: TD () Delete
Name: TURNER, TAMMY,
Address: 13245 SW 3RD AVE
City-St-Zip: NEWBERRY, FL 32669

Title: VD () Delete
Name: TURNER, JEFFERY LYNN,
Address: 13245 SW 3RD AVE
City-St-Zip: NEWBERRY, FL 32669

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TAMMY TURNER

TD

05/05/2008

Electronic Signature of Signing Officer or Director

Date