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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 436424

(6)

Turpin appraisal services, inc

Principal Place of Business Mailing Address 307 1/2 TWIGGS ST 307 1/2 TWIGGS ST **TAMPA FL 33602** TAMPA FL 33602-4503 3. Date Incorporated or Qualified 3a. Date of Last Report 04/15/1996 09/19/1973 2. Principal Place of Business Mailing Address 4. FEI Number Applied For 59-1483453 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8,75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 5. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zio Country Z_{1D} Country This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RAMSEY (MAYNARD) 2423 SUNSET DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33629** 83 84 Zip Code 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 lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6) PD DELETE Change Addition TITLE 1.1 TITLE TURPIN, FRED J. NAME 1.2 NAME 307 1/2 TWIGGS STREET 1.3 STREET ADDRESS STREET ADDRESS TAMPA FL CITY-ST-ZIP 1.4 CITY - ST-ZIP DELETE Change Addition TITLE 2.1 TITLE TURPIN.CAROL R NAME **2.2 NAME** 307 1/2 TWIGGS STREET STREET ADDRESS 2.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE TURPIN, CAROL R. NAME 3.2 NAME 307 1/2 TWIGGS STREET STREET ADDRESS 3.3 STREET ADDRESS TAMPA FL CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS DITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADORESS 5.4 CITY-ST-ZIP DITY - ST - ZIP DELETE TITLE 6.1 TITLE ☐ Change ☐ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

DITY-ST-ZIE

6.4 CITY-ST-2IP

2/12/97

(813)228-7923

FILED

Feb 17 1997 8:00am

Secretary of State

14. I do 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.