

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

0386374

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 10, 1999 8:00 am
Secretary of State

03-10-1999 90198 031 ***150.00

DOCUMENT # 572311

1. Corporation Name
TURNER POINT LANDING, INC.



Principal Place of Business
1315 O HOWARD AVENUE
201
TAMPA FL 33606
US

Mailing Address
1315 SO HOWARD AVENUE
201
TAMPA FL 33606
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 1315 So Howard Ave
Suite, Apt. #, etc.
22 201
City & State
23 Tampa, Fl.
Zip
24 33606 Country
25 US

2a. Mailing Address
27 Suite, Apt. #, etc.
City & State
28 Zip
29 Country
30

3. Date Incorporated or Qualified
05/18/1978
4. FEI Number
59-1831856 Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required
6. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution Added to Fees
8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

HENZ, PAMELA E
2807 W PLATT TREET
TAMPA FL 33609

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
HENZ, PAMELA E.
17- SPANISH MAIN
TAMPA FL 33609

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 familiar 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)

DATE

12. OFFICERS AND DIRECTORS

TITLE	STD	<input type="checkbox"/> DELETE
NAME	HENZ, PAMELA E	
STREET ADDRESS	2807 W PLATT STREET	
CITY-ST-ZIP	TAMPA FL 33609	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DPresident	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Elden D. HARRIS	
1.3 STREET ADDRESS	1315 S. HOWARD AVE. 201	
1.4 CITY-ST-ZIP	TAMPA, FL. 33606	
2.1 TITLE	STD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	PAMELA E. HENZ	
2.3 STREET ADDRESS	17- SPANISH MAIN	
2.4 CITY-ST-ZIP	Tampa, FL. 33609	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Elden D. Harris Pres. 2/24/99 (813) 251-8488

CR2E034 (11/98)