

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 851959

FILED
Jan 08, 2007
Secretary of State

Entity Name: GUY M. TURNER, INCORPORATED

Current Principal Place of Business:

BOX 7776
GREENSBORO, NC 27417

New Principal Place of Business:

Current Mailing Address:

BOX 7776
GREENSBORO, NC 27417

New Mailing Address:

FEI Number: 56-0727163

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: CLARK, JIMMY D.,
Address: ONE ELM RIDGE LANE
City-St-Zip: GREENSBORO, NC

Title: V () Delete
Name: GROSE, ROBERT T,
Address: P.O. BOX 267, NA
City-St-Zip: FRANKLINVILLE, NC

Title: V () Delete
Name: HOGGARD, MICHAEL W,
Address: 1502 HOLGATE DR.
City-St-Zip: GREENSBORO, NC

Title: VAS () Delete
Name: MORRISON, DONALD W,
Address: 327 THROCKMORTON DR.
City-St-Zip: MADISON, NC

Title: S () Delete
Name: LANDRETH, JEANETTE A,
Address: 5715 CALAIS DR.
City-St-Zip: PLEASANT GARDEN, NC

Title: VP () Delete
Name: WHITE, JOSEPH J
Address: 2171 WILLOW MEADOWS DR
City-St-Zip: PLEASANT GARDEN, NC 27313

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
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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 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: JEANETTE A LANDRETH

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01/08/2007

Electronic Signature of Signing Officer or Director

Date