2009 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A06000001161

City-St-Zip:

LAMONT, FL 32336

Entity Name: TURNER PARTNERS, L.L.L.P.

FILED Mar 19, 2009 Secretary of State

New Principal Place of Business: Current Principal Place of Business: 214 HAMRICK LAMONT, FL 32336 **Current Mailing Address: New Mailing Address:** 214 HAMRICK LAMONT, FL 32336 FEI Number: 58-2239207 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPDIRECT AGENTS, INC. 515 EAST PARK AVE. TALLAHASSEE, FL 32301 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: Electronic Signature of Registered Agent Date **GENERAL PARTNER INFORMATION:** ADDRESS CHANGES ONLY: Document #: TURNER SYDEL, LAURA LEE TRUSTEE Name: 214 HAMRICK Address: Address: City-St-Zip: LAMONT, FL 32336 City-St-Zip: Document #: TURNER, RHETT LEE TRUSTEE Name: Address: 214 HAMRICK Address: City-St-Zip: LAMONT, FL 32336 City-St-Zip: Document #: TURNER GARLINGTON, SARA JEAN TRUSTEE Name: 214 HAMRICK Address: Address: City-St-Zip: LAMONT, FL 32336 City-St-Zip: Document #: Name: TURNER, IV, ROBERT EDWARD TRUSTEE 214 HAMRICK Address: Address: City-St-Zip: LAMONT, FL 32336 City-St-Zip: Document #: TURNER, REED BEAUREGAR TRUSTEE Name: Address: 214 HAMRICK Address:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

City-St-Zip:

SIGNATURE: REED B TURNER GP 03/19/2009