

**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**

**FILED**  
**Apr 20, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # A31977**

1. Entity Name  
**TURNER INVESTMENTS, LTD.**



Principal Place of Business  
**3333 DUNDEE ROAD  
WINTER HAVEN, FL 33880**

Mailing Address  
**PO BOX 7311  
WINTER HAVEN, FL 33883-7311**



03202006 No Chg-LP

CR2E003 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3083590**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**TURNER, MARK G  
255 MAGNOLIA AVENUE, S.W.  
WINTER HAVEN, FL 33880**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

**FILE NOW!!! FEE IS \$500.00  
After May 1, 2006, Fee will be \$900.00**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**  
**NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # **P99000056752**  
NAME **TURNER MANAGEMENT SERVICES CORPORATION**  
STREET ADDRESS **304 LOCHEN CIRCLE, SOUTHEAST**  
CITY-ST-ZIP **WINTER HAVEN, FL 338843708**

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**U00000521629  
05/02/06-80143-011 500.00**

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14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**MARK G. TURNER, AS President of Turner Management Services, Inc., a Member**

Date

Daytime Phone #

**4/17/06 (863) 293-1184**

STAPLE CHECK HERE