


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2007 8:00 am
Secretary of State

05-11-2007 90033 039 ***158.75

DOCUMENT # F06000006277 1. Entity Name TURNER PROPERTIES - GEORGIA, INC.	
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Principal Place of Business ONE CNN CENTER ATLANTA, GA 30303	Mailing Address ONE TIME WARNER CENTER NEW YORK, NY 10019
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DO NOT WRITE IN THIS SPACE

40111104



04262007 No Chg-P CR2E034 (11/05)

4. FEI Number 58-1739480	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD FRASER, POWELL A JR. ONE CNN CENTER ATLANTA, GA 30303
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD MILLER, VICTORIA ONE CNN CENTER ATLANTA, GA 30303
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS CANNON, JANICE ONE TIME WARNER CENTER NEW YORK, NY 10019
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T ROWLAND, ARCHIE W ONE CNN CENTER ATLANTA, GA 30303
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V KAMPFE, JOHN E ONE CNN CENTER ATLANTA, GA 30303
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS SAMS, LOUISE S ONE CNN CENTER ATLANTA, GA 30303

DO NOT WRITE
IN THIS SPACE

12. 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: Janice Cannon JANICE CANNON, ASSISTANT SECRETARY 4/30/2007

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #