

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2002 8:00 am
Secretary of State

02-19-2002 90021 042 ***150.00

DOCUMENT # F97000004987

1. Entity Name

TURNKEY MANAGEMENT, INC.

Principal Place of Business

**900 SOUTH US HWY 1 STE 204
 JUPITER FL 33477**

Mailing Address

**900 SOUTH US HWY 1
 203
 JUPITER FL 33477**

2. Principal Place of Business

10290 SE BANYAN WAY

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 3059

Suite, Apt. #, etc.

City & State

TEQUESTA, FL

City & State

TEQUESTA FL

4. FEI Number

52-1354325

Applied For

Not Applicable

Zip

Country

33469

Zip

Country

33469

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

ROUNTOUNIS, GISELE

900 SOUTH US HWY ONE STE 204

JUPITER FL 33477

7. Name and Address of New Registered Agent

Name

ROUNTOUNIS, GISELE

Street Address (P.O. Box Number is Not Acceptable)

10290 SE BANYAN WAY

City

TEQUESTA

FL

Zip Code

33469

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2/1/2002

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
 NAME **CRONIN, DANIEL**
 STREET ADDRESS **900 SOUTH US HWY ONE SUITE 204**
 CITY-ST-ZIP **JUPITER FL**

TITLE **VS** ☐ Delete
 NAME **ROUNTOUNIS, GISELE**
 STREET ADDRESS **900 SOUTH US HWY ONE SUITE 204**
 CITY-ST-ZIP **JUPITER FL**

TITLE **CD** ☐ Delete
 NAME **O'HARE, JAMES A**
 STREET ADDRESS **900 SOUTH US HWY ONE SUITE 204**
 CITY-ST-ZIP **JUPITER FL**

TITLE **VD** ☐ Delete
 NAME **RYAN, JOHN J**
 STREET ADDRESS **900 SOUTH US HWY ONE SUITE 204**
 CITY-ST-ZIP **JUPITER FL**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Date

Daytime Phone #

2/1/2002 561/748-8441

CR2E034 (9/01)