2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H38726

Entity Name: GUY W. TURNER, P.A.

FILED Mar 07, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2916 DOUGLAS ROAD 2100 PONCE DE LEON BLVD. SUITE 3 SUITE 1180

CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

2916 DOUGLAS ROAD 2100 PONCE DE LEON BLVD. SUITE 3 SUITE 1180

CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

FEI Number: 59-2467659 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:

TURNER, GUY W.
2916 DOUGLAS RD
CORAL GABLES, FL 33134 US

TURNER, GUY W.
2100 PONCE DE LEON BLVD.
SUITE 1180
CORAL GABLES, FL 33134 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: 03/07/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST () Delete Title: PST (X) Change () Addition

Name: TURNER, GUY W., Address: 2916 DOULGAS RD Name: TURNER, GUY W., Address: 2100 PONCE DE LEON BLVD.

Address: 2916 DOULGAS RD Address: 2100 PONCE DE LEON BLV
City-St-Zip: CORAL GABLES, FL City-St-Zip: CORAL GABLES, FL

Name: TURNER, GUY W., Name: TURNER, GUY W.,

Address: 2916 DOUGLAS RD Address: 2100 PONCE DE LEON BLVD. SUITE 1180

City-St-Zip: CORAL GABLES, FL City-St-Zip: CORAL GABLES, FL 33134

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 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: GUY W TURNER OFFI 03/07/2008