## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H64625

(7)

Mailing Address

TURNER AND TURNER, INC.

FILED Mar 24 1997 8:00am Secretary of State

204-59TH AVENUE DRIVE WEST BRADENTON FL 34207			204-59TH AVENUE DRIVE WEST Bradenton FL 34207-4217					
					3. Date Incorporated or Qualified 07/02/1985	3a. Date of L 03/22/19		
2. Principal Pa	ace of Business	2a. Mailing Address			4. FEI Number		Applied For	
21 26					59-2556414	<u> </u>	Not Applicable	
Suite, Apt #, ctc Suite, Apt #, etc. 22 27					5. Certificate of Status Desired	1 1 ' '	.75 Additional ee Required	
City & State         City & State           23         28					Election Campaign Financing     Trust Fund Contribution		5.00 May Be	
Zipi <b>24</b>	Country 25	7(p			8. This corporation has liability for Florida Statutes	liability for intangible tax under s. 199.032, ↓ Yes  No		
g. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
TURN	VER, CARL R.		81	Name				
204-59TH AVENUE DRIVE WEST BRADENTON FL 34207			82	Street Address (P.O. Box Number is Not Acceptable)				
			83					
L		_	84			FL 85	Zip Code	
office or re	egistered agent, or both, in th	607-0502 and 607,1508, Florida Statule is State of Florida. Such change was a in obligations of, Section 607,0505, Flor	uthorized b	y the corpora	rporation submits this statement for the pation's board of directors. I hereby accept	ourpose of chango of the appointment	ging its registered ent as registered	
SIGNATURE								
	Signation , type dior per her canacitoting s			ent signature requ	uired when reinstating)	DATE	0700011140	
		RS AND DIRECTORS  DELETE	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	(	
1111	PO	L OCCERE	† 1 TITLE	ľ		LJ Cii	larite	
NAME	TURNER, CARL R.		1.2 NAME					
STREET AD HESS	204 59TH AVE DR W			T ADDRESS				
COY-SI ZIF	The second control of		1.4 CITY -	ST-7IP				
THEF	101		2 1 TITLE	}	· · : L Change			
NAME			2 2 NAME					
\$THEFT ASSORTS	204 59TH AVE DRIVE W	EST	2.3 STREE	LADDRESS				
Cilir-St ZiP	BRADENTON FL		2 4 CITY	S1-ZIP				
1016		DELETE	3 1 TITLE	ļ		☐ Ch	nange [] Addition	
NAME			3.2 NAME					
STREET ADDRESS:			3.3 STREE	T ADDRESS				
C-TY+S1+ZIP			3.4. CHTY	S1 - 21P				
Tillé		DELLLE	4.1 TITLE			☐ Ct	nange	
NAME			4. 2 NAM	;				
STREET ADOPTES			4.3 \$1RE	I ADDRESS				
City St 2in			4.4 CITY-	ST-21P				
Tiff;F		DFLETE	5 1 TITLE			Ct	nange Addition	
NAME			5.2 NAME					
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Dily St 7.			5.4 CHY-	1				
110	m	☐ DELFTE	61 TITLE	<u> </u>		Cr	nange Addition	
NAM!			62 NAME					
				T ADDRESS				
STREET ADDRESS								
CHY-St Zin	ar existly 4531 this inflammation	supplied with this filling does not qualif	64 CITY-		ed in Section 119.07(3)(i). Florida Statute	s I further certif	or that the	

Fig. hereby certify that the information supplied with this tiling does not quality for the exemption stated in Section 119.07(5)(f), Florida Statutes. Further certify that the information indicated on this air and report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that fair an other or director of the corporation or the receiver of fusive empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

THE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR