

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000012845

FILED
Mar 30, 2005
Secretary of State

Entity Name: TURNING POINT EQUITIES, LLC

Current Principal Place of Business:

4400 N. HWY 19-A
SUITE 6
MOUNT DORA, FL 32757 US

New Principal Place of Business:

Current Mailing Address:

4400 N. HWY 19-A
SUITE 6
MOUNT DORA, FL 32757 US

New Mailing Address:

FEI Number: 57-1163445

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEWART, KIM Y
147 W. 9TH ST.
MOUNT DORA, FL 32757 US

Name and Address of New Registered Agent:

VOSE, GRETCHEN R
527 WEKIVA COMMONS CIRCLE
APOPKA, FL 32712 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: GRETCHEN R.H. VOSE

03/30/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: LYBRAND, PATRICIA O
Address: 4400 N. HWY. 19-A SUITE 6
City-St-Zip: MOUNT DORA, FL 32757

Title: MGRM () Delete
Name: PARADIS, DEBRA
Address: 4400 N. HWY. 19-A, SUITE 6
City-St-Zip: MOUNT DORA, FL 32757

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PATRICIA O. LYBRAND

MGRM

03/30/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date