

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000013648

FILED
Apr 15, 2005
Secretary of State

Entity Name: TURNURE FLORIDA PROPERTIES, L.L.C.

Current Principal Place of Business:

4015 CASEY KEY RD
NOKOMIS, FL

New Principal Place of Business:

Current Mailing Address:

134 READE STREET
SUITE TWO
NEW YORK, NY 10013

New Mailing Address:

FEI Number: 81-0614063 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MCGINNESS, W. LEE
1800 SECOND ST., STE. 971
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: TURNURE, RICHARD
Address: 134 READE ST #2
City-St-Zip: NEW YORK, NY 10013

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGRM () Change (X) Addition
Name: BARBARA, TURNURE
Address: 1 GAY STREET
City-St-Zip: SHARON, CT 06069

Title: MGRM () Change (X) Addition
Name: VIRGINIA, MORGAN
Address: 1577 OLD MANCHESTER RD
City-St-Zip: PERU, VT 05152

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: RICHARD TURNURE

MGRM

04/15/2005

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