

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000098708

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Entity Name:** MIKE TURNER ENTERPRISES, LLC

**Current Principal Place of Business:**

1984 CROWN POINTE BLVD.  
PENSACOLA, FL 32506

**New Principal Place of Business:**

1984 CROWN POINTE BLVD.  
PENSACOLA  
PENSACOLA, FL 32506 UN

**Current Mailing Address:**

1984 CROWN POINTE BLVD  
PENSACOLA, FL 32506

**New Mailing Address:**

FEI Number: 20-3602312

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TURNER, WILLIAM M  
1984 CROWN POINTE BLVD.  
PENSACOLA, FL 32506 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/MANAGERS:**

Title: MGR  
Name: TURNER, WILLIAM M  
Address: 1984 CROWN POINTE BLVD  
City-St-Zip: PENSACOLA, FL 32506

I hereby 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: WILLIAM M TURNER

MGR

04/11/2012

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