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Secretary of State

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # L35763**

TURNSTONE INVESTMENTS, INC.

Mailing Address Principal Place of Business 1031 BAY ESPLANADE 1031 BAY ESPLANADE CLEARWATER FL 33767 CLEARWATER FL 33767 DO NOT WRITE IN THIS SPACE US US 3. Date Incorporated or Qualifed 12/11/1989 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 59-2986075 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite. Apt. #. etc. П 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country 8. This corporation owes the current year Intangible Zip Country Zip 30 Personal Property Tax. 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent CRISLER, BOYD Street Address (P.O. Box Number is Not Acceptable) 82 1031 BAY ESPLANADE CLEARWATER FL FL 34630 84 85 Zip Code City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. ☐ Addition ☐ Change ☐ DELETE 1.1 TITLE TITLE CRISLER, WILLIAM BOYD 1.2 NAME NAME 1031 BAY ESPLANADE 1.3 STREET ADDRESS STREET ADDRESS **CLEARWATER BEACH FL** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition 2.1 TITLE TITLE CRISLER. MORRIS M. 2.2 NAME NAME 1031 BAY ESPLANADE 2.3 STREET ADDRESS STREET ADDRESS **CLEARWATER BEACH FL** 2.4 CMY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ DELETE 3.1 TITLE TITLE CRISLER, BETTY BOYD 32 NAME NAME 1031 BAY ESPLANADE 3.3 STREET ADDRESS STREET ADDRESS **CLEARWATER BEACH FL** 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIF ☐ Change ☐ Addition □ DELETE 51 Title TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ DELETE

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIF

TITLE

NAME

CR2E034 (11/98)

☐ Change

☐ Addition