


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2008 08:00 A
Secretary of State

DOCUMENT # N96000006209	
1. Entity Name TURN 2 FOUNDATION, INC.	

Principal Place of Business IMG CENTER 1360 E. 9TH ST. #100 CLEVELAND, OH 44114	Mailing Address IMG CENTER 1360 E. 9TH ST. #100 CLEVELAND, OH 44114
---	---

DO NOT WRITE IN THIS SPACE



02072008 No Chg-NP CR2E037 (4/06)

4. FEI Number 34-1847687	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent KOCH, JONATHAN C 100 SOUTH ASHLEY DRIVE #1290 TAMPA, FL 33602

DO NOT WRITE
IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	000000854532 03/27/08-80011-019 61.25
---	---	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JETER, DEREK 17005 CANDELEDA DE AVILA TAMPA, FL 33613
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD JETER, CHARLES 28 LESSING RD WEST ORANGE, NJ 07052
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SDT JETER, DOROTHY 28 LESSING RD WEST ORANGE, NJ 07052
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHARLEE, JETER 3 ON EAST 65TH ST #19A NEW YORK, NY 10003
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: 	2/28/08	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #