

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2006 8:00 am
Secretary of State

03-21-2006 90030 033 ***158.75

DOCUMENT # P01000024738
 1. Entity Name
 TURNER WALL SYSTEMS, INC.



Principal Place of Business: 1243 TALLEVAST ROAD, SARASOTA, FL 34243
 Mailing Address: 1243 TALLEVAST ROAD, SARASOTA, FL 34243

2. Principal Place of Business: Suite, Apt. #, etc.
 3. Mailing Address: Suite, Apt. #, etc.

City & State

Zip Country

4003300



03172006 Chg-P CR2E034 (11/05)

4. FEI Number: 65-1087983
 Applied For: Not Applicable

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MESSICK, ROBERT E
 290 COCOANUT AVE
 SARASOTA, FL 34236

7. Name and Address of New Registered Agent

Name: Charles T. Sprague
 Street Address (P.O. Box Number is Not Acceptable): 1243 Tallevast Rd.
 City: Sarasota FL Zip Code: 34243

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: *Charles T. Sprague* Charles T. Sprague, President 3/17/06 DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE: D	TURNER, SHELLY K	<input checked="" type="checkbox"/> Delete
STREET ADDRESS: 1243 TALLEVAST ROAD	SARASOTA, FL 34243	
TITLE: O	MUSTARI, RONALD	<input checked="" type="checkbox"/> Delete
STREET ADDRESS: 290 COCOANUT AVE	SARASOTA, FL 34236	
TITLE:		<input type="checkbox"/> Delete
STREET ADDRESS:		
TITLE:		<input type="checkbox"/> Delete
STREET ADDRESS:		
TITLE:		<input type="checkbox"/> Delete
STREET ADDRESS:		
TITLE:		<input type="checkbox"/> Delete
STREET ADDRESS:		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: President	Charles T. Sprague	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS: 1243 Tallevast Rd.	Sarasota FL 34243	
TITLE:		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS:		
TITLE:		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS:		
TITLE:		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS:		
TITLE:		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS:		

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 607, 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: *Charles T. Sprague* Charles T. Sprague 3/17/06 941 3587900 DATE DAYTIME PHONE #