


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 16, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P01006025228</b> 1. Entity Name <b>TURNSTONE PROPERTIES, INC.</b>	
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Principal Place of Business <b>49 TURNSTONE DR SAFETY HARBOR, FL 34695</b>	Mailing Address <b>49 TURNSTONE DR SAFETY HARBOR, FL 34695</b>
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**DO NOT WRITE IN THIS SPACE**



04102004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>59-3704229</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

**BANDONI, NINA S  
49 TURNSTONE DR  
SAFETY HARBOR, FL 34695**

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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 \_\_\_\_\_

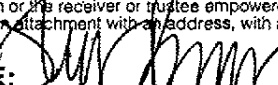
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	<b>U000000115041 04/16/04-90008-021 150.00</b>
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D BANDONI, NINA S 49 TURNSTONE DR SAFETY HARBOR, FL 34695</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D BANDONI, ROCK G 49 TURNSTONE DR SAFETY HARBOR, FL 34695</b>
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 its 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:  **Nina Bandoni** **4/13/04** **727-712-1196**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #