

FILED
Mar 15, 2005 8:00 am
Secretary of State

02-09-2005 90062 043 ***150.00

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P02000017569 1. Entity Name TURTLE LAKE PRODUCTIONS, INC	
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Principal Place of Business 4601 118TH AVE. NORTH CLEARWATER, FL 33762	Mailing Address 6155 114 AVE AVE NORTH PINELLAS PARK, FL 33782
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66005438



01302005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 04-3626936	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
**SCHULTZ, MALISSA C
6155 114 AVE AVE NORTH
PINELLAS PARK, FL 33782**

**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: _____ DATE: _____
(NOTE: Registered Agent signature required when registering)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES SCHULTZ, MALISSA C 6155 114 AVE AVE NORTH PINELLAS PARK, FL 33782
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SCHULTZ, JOSEPH 6155 114 AVE AVE NORTH PINELLAS PARK, FL 33782
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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 exemption stated in Section 119.07(3)(i), 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: *Pres.* **3-4-05 727-572-5500**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #