

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000017792

Entity Name: LEN-TURN FAMILY GP, INC.

FILED
Apr 07, 2007
Secretary of State

Current Principal Place of Business:

550 TALIA CIRCLE
FAIRVIEW, TX 75069

New Principal Place of Business:

Current Mailing Address:

550 TALIA CIRCLE
FAIRVIEW, TX 75069

New Mailing Address:

FEI Number: 02-0550108

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOX * ROTHSCHILD
222 LAKEVIEW AVENUE
SUITE 700
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/S () Delete
Name: TURNBULL, SCOTT A MR.
Address: 550 TALIA CIRCLE
City-St-Zip: FAIRVIEW, TX 75069

Title: V/T () Delete
Name: TURNBULL, LOIS C MRS.
Address: 985 FLEET DRIVE, APT. #558
City-St-Zip: VIRGINIA BEACH, VA 23454 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V/T (X) Change () Addition
Name: TURNBULL, LOIS C MRS.
Address: 550 TALIA CIRCLE
City-St-Zip: FAIRVIEW, TX 75069 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SCOTT A. TURNBULL

P/S

04/07/2007

Electronic Signature of Signing Officer or Director

Date