

FILED
Jun 26, 2003 8:00 am
Secretary of State

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06-11-2003 90059 045 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000062116	
1. Entity Name TURNER SERVICES CORPORATION	
Principal Place of Business 9212 HIGHLAND RIDGE WAY TAMPA, FL 33647	Mailing Address 9212 HIGHLAND RIDGE WAY TAMPA, FL 33647
2. Principal Place of Business	3. Mailing Address
State, Apt. #, etc.	State, Apt. #, etc.
City & State	City & State
Zip	Country
4. FFI Number 02-0619084	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FRICK, ANNE T 9212 HIGHLAND RIDGE WAY TAMPA, FL, 33647	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent's signature required when submitting.) DATE	
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS	
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP
P FRICK, ANNE T 9212 HIGHLAND RIDGE WAY TAMPA, FL 33647	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP
V FRICK, JAMES A 9212 HIGHLAND RIDGE WAY TAMPA, FL 33647	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP
☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP
☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP
☐ Delete	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 807, 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 the empowered.	
SIGNATURE: <u>ANNE T. Frick</u> 6/5/03 813-901-8000	



55049816
#P02000062116

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

June 12, 2003

TURNER SERVICES CORPORATION
9212 HIGHLAND RIDGE WAY
TAMPA, FL 33647

Subject: TURNER SERVICES CORPORATION

Reference Number: P02000062116

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/al

ANNUAL REPORTS SECTION

The number has been added. I'm sorry for the oversight.
Thank you
Abick

Division of Corporations - P.O. BOX 1500 - Tallahassee, Florida 32302