2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P03000008389

1. Entity Name
TUNE PCOLA, INC.

Principal Place of Business	Mailing Address
2354 W MICHIGAN AVENUE	121 WAYNEL CIRCLE, SE
PENSACOLA, FL 32526	FORT WALTON BEACH, FL 32548 US

DO NOT WRITE IN THIS SPACE

04162008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
03-0502871	Not Applicable

5. Certificate of Status Desired   ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

TURNER, ALVIN R
121 WAYNEL CIRCLE SE
FORT WALTON BEACH, FL 32548

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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 _Alvin R Turner_

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)

DATE 4/16/2008

FILE NOW!!! FEE IS $150.00 **After May 1, 2008 Fee will be $550.00**	**9.** Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	U00000927572 05/20/08-80108-018 150.00

10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	TURNER, WILLIAM J
STREET ADDRESS	214 WEKIVA COVE
CITY-ST-ZIP	DESTIN, FL 32541
TITLE	S
NAME	TURNER, ALVIN R
STREET ADDRESS	121 WAYNEL CIRCLE, SE
CITY-ST-ZIP	FORT WALTON BEACH, FL 32548
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE

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: _Alvin R Turner_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 4/16/2008   Daytime Phone # 850 244-2064

ALVIN R. TURNER