2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 13, 2005 8:00 am
Secretary of State
04-15-2005 90097 012 ***163.75

DOCUMENT # P04000101123

1. Entity Name

TURNER BROTHERS FLOORING, INC.

Principal Place of Business	Mailing Address
611 PONTA VEDRA LAKES BLVD APT 208 PONTA VEDRA BEACH FL 32082 US	611 PONTA VEDRA LAKES BLVD APT 208 PONTA VEDRA BEACH FL 32082 US

1st MOORE CR2E034 (10/04)

2. Principal Place of Business	3. Mailing Address
611 Ponta Vedra Lakes Blvd	611 Ponta Vedra Lakes Blvd
Suite, Apt. #, etc.: Apt ~~3307~~ 3307	Suite, Apt. #, etc.: Apt 3307
City & State: Ponta Vedra Beh Fl	City & State: Ponta Vedra Beh Fl
Zip: 32082 Country: St Johns	Zip: 32082 Country: St Johns

4. FEI Number: 300226/054 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
TURNER, JOHN B 611 PONTA VEDRA LAKES BLVD APT ~~208~~ 35 3307 PONTA VEDRA BEACH FL 32082	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: John B Turner — John B Turner — DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee Will Be $550.00
Make Check Payable to Florida Department of State

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	P TURNER, JOHN B 611 PONTA VEDRA LAKES BLVD PONTA VEDRA BEACH FL 32082	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP TURNER, RICHARD W 611 PONTA VEDRA LAKES BLVD PONTA VEDRA BEACH FL 32082	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S TURNER, SHEILA G 611 PONTA VEDRA LAKES BLVD PONTA VEDRA BEACH FL 32082	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ 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)(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: John B Turner — 5-6-05 — 502-8175
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #