


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2007 8:00 am
Secretary of State

01-31-2007 90047 023 ***150.00

DOCUMENT # P04000148348	
1. Entity Name TURNER FITNESS TRAINING, INC.	

Principal Place of Business 127 HARBOR BOULEVARD 7 DESTIN, FL 32541	Mailing Address 127 HARBOR BOULEVARD 7 DESTIN, FL 32541
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40007554



DO NOT WRITE IN THIS SPACE

01212007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1811167	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent TURNER, RONNIE C 127 HARBOR BOULEVARD 7 DESTIN, FL 32541
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**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 *Ronnie C. Turner* 1-24-07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P.T. TURNER, RONNIE C 127 HARBOR BOULEVARD, #7 DESTIN, FL 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP.S. TURNER, RONNIE C 127 HARBOR BOULEVARD, #7 DESTIN, FL 32541
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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: *Ronnie C. Turner*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-24-07 850 543-1375
Date Daytime Phone #