2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

12. I hereby certify that the information supplied with this filing doe indicated on this report or supplemental report is true and according to the corporation or the receiver or trustee empowerer by eye if changed, or on an attachment with an address, with all one.

SIGNATURE:

Secretary of State DOCUMENT # P05000027483 02-22-2006 90010 049 ***150.00 TURNPIKE HILL PLANTATION, INC. Principal Place of Business Mailing Address 6505 EDGEWATER DRIVE ORLANDO FL 32810 6505 EDGEWATER DRIVE ORLANDO FL 32810 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) Applied For 4. FEI Number City & State City & State 0 (Not Applicable Zio Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RANDOLPH, TIMOTHY V SR. Street Address (P.O. Box Number is Not Acceptable) 6505 EDGEWATER DRIVE ORLANDO FL 32810 City Zip Code FL 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 title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. TITLE TITLE Change Addition ☐ Delete NAME RANDOLPH, TIMOTHY, V SR. NAME STREET ADDRESS 6505 EDGEWATER DRIVE STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32810 ~ CITY-ST-ZIP ☐ Delete ☐ Change Addition A NAME RANDOLPH, TIMOTHY:V JR STREET ADDRESS 6505 EDGEWATER DRIVE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ORLANDO FL 32810 TITLE ☐ Change ☐ Addition THILE Delete NAME RANDOLPH, TIMOTHY V SR NAME STREET ADDRESS STREET ADDRESS 6505 EDGEWATER DRIVE CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32810 Change ☐ Addition TITLE ☐ Delete TITLE RANDOLPH, TIMOTHY V JR NAME STREET ADDRESS 6505 EDGEWATER DRIVE STREET ADDRESS ORLANDO FL 32810 CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Delete ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information and that my signature shall have the same legal effect as if made under oath, that I am an officer or director the this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11

7-8-06

FILED

Feb 22, 2006 8:00 am