2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2008
Secretary of State

DOCUMENT# P05000121169

Entity Name: C.C. TURNER, INC.

Current Principal Place of Business:

3615 CENTRAL AVENUE
FORT MYERS, FL 33901 US

New Principal Place of Business:

Current Mailing Address:

3615 CENTRAL AVENUE
SUITE 3
FORT MYERS, FL 33901 US

New Mailing Address:

FEI Number: 20-3401103 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANDREW SERVICE CORPORATION OF FLORIDA
201 N. FRANKLIN STREET
SUITE 2100
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

SCHMOYER, IAN C
6540 CORPORATE PARK CIRCLE
SUITE 1
FORT MYERS, FL 33966 US

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.

SIGNATURE: IAN C. SCHMOYER 03/03/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: COOO ( ) Delete
Name: SCHMOYER, IAN C
Address: 8801 COLLEGE PARKWAY, SUITE 1
City-St-Zip: FORT MYERS, FL 33919 US

Title: VPT ( ) Delete
Name: TURNER, TODD
Address: 8951 RIVER PALM COURT
City-St-Zip: FORT MYERS, FL 33919

Title: S ( ) Delete
Name: TURNER, DAVID G
Address: 8801 COLLEGE PKWY., STE. 1
City-St-Zip: FT. MYERS, FL 33919

Title: DP ( ) Delete
Name: SCHOMYER, IAN C
Address: 8801 COLLEGE PARKWAY, SUITE 1
City-St-Zip: FORT MYERS, FL 33919 US

Title: VP ( ) Delete
Name: MCMURRER, JOSEPH E
Address: 8801 COLLEGE PARKWAY, SUITE 1
City-St-Zip: FORT MYERS, FL 33919 US

Title: COO ( ) Delete
Name: SCHOMYER, IAN C
Address: 8801 COLLEGE PARKWAY, SUITE 1
City-St-Zip: FORT MYERS, FL 33919 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IAN C. SCHMOYER P 03/03/2008
Electronic Signature of Signing Officer or Director Date