

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000019825

Entity Name: TURNER REPORTING SERVICE, INC.

FILED  
Apr 29, 2010  
Secretary of State

**Current Principal Place of Business:**

6808 POLEY CREEK DRIVE W  
LAKELAND, FL 33811

**New Principal Place of Business:****Current Mailing Address:**

P.O. BOX 5438  
LAKELAND, FL 33807

**New Mailing Address:**

6808 POLEY CREEK DR. WEST  
LAKELAND, FL 33811

FEI Number: 26-2020622

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WOOD, F. ELAINE  
6808 POLEY CREEK DRIVE W  
LAKELAND, FL 33811 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WOOD, F. ELAINE  
Address: 6808 POLEY CREEK DRIVE W  
City-St-Zip: LAKELAND, FL 33811

Title: S  
Name: WOOD, F. ELAINE  
Address: 6808 POLEY CREEK DRIVE W  
City-St-Zip: LAKELAND, FL 33811

Title: TR  
Name: WOOD, F. ELAINE  
Address: 6808 POLEY CREEK DRIVE W  
City-St-Zip: LAKELAND, FL 33811

Title: DIR  
Name: WOOD, F. ELAINE  
Address: 6808 POLEY CREEK DRIVE W  
City-St-Zip: LAKELAND, FL 33811

I hereby 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 all other like empowered.

SIGNATURE: F. ELAINE WOOD

PT

04/29/2010

Electronic Signature of Signing Officer or Director

Date