

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000068659

Entity Name: TURNKEY SERVICES, INC

**FILED**  
**Mar 21, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

325 SW 66TH AVENUE  
MARGATE, FL 33068

**New Principal Place of Business:**

**Current Mailing Address:**

325 SW 66TH AVENUE  
MARGATE, FL 33068

**New Mailing Address:**

PO BOX 970168  
COCONUT CREEK, FL 33097

FEI Number: 80-0221130

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MARCHEL, JOHN E  
325 SW 66TH AVENUE  
MARGATE, FL 33097 US

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

MARCHEL, LILLIAN C  
325 SW 66TH AVENUE  
MARGATE, FL 33097 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: LILLIAN C MARCHEL

03/21/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MARCHEL, JOHN E  
Address: PO BOX 970168  
City-St-Zip: COCONUT CREEK, FL 33097

Title: TRES  
Name: MARCHEL, JOHN E  
Address: PO BOX 970168  
City-St-Zip: COCONUT CREEK, FL 33097

Title: SEC  
Name: MARCHEL, LILLIAN C  
Address: PO BOX 970168  
City-St-Zip: COCONUT CREEK, FL 33097

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: LILLIAN C MARCHEL

SEC

03/21/2010

Electronic Signature of Signing Officer or Director

Date