

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 06, 1999 8:00am
Secretary of State

02-06-1999 90001 004 ****150.00

DOCUMENT # P24085

1. Corporation Name

TURNER SCULPTURE, LTD. INCORPORATED

Principal Place of Business

BOX 128
ONLEY VA 23418

Mailing Address

BOX 128
ONLEY VA 23418

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/26/1989

4. FEI Number

54-1132631

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

HKES&F REGISTERED AGENT CORP.
2601 S BAYSHORE DR
STE 600
MIAMI FL 33133

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VP
NAME TURNER, WILLIAM H.
STREET ADDRESS RT. 13, BOX 128
CITY-ST-ZIP ONLEY VA 23418

DELETE

TITLE P
NAME TURNER, DAVID H.
STREET ADDRESS 5 GRACE STREET
CITY-ST-ZIP ONANCOCK VA 32417

DELETE

TITLE S
NAME JESTER, CYNTHIA K.
STREET ADDRESS RT. 13, BOX 447
CITY-ST-ZIP ONLEY VA

DELETE

TITLE T
NAME DRUMMOND, MELVIN E JR.
STREET ADDRESS 14308 DRUMMOND LANE
CITY-ST-ZIP PAINTER VA

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MELVIN E DRUMMOND JR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 14 1999

Date

757-787-2818

Daytime Phone #

CR2E034 (11/98)