## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P92000009498

Entity Name: TURBINE SOLUTIONS, INC.

BROOKSVILLE, FL 34601 US

City-St-Zip:

FILED Apr 19, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 29 SO BROOKSVILLE AVENUE BROOKSVILLE, FL 34601 **Current Mailing Address: New Mailing Address:** PO BOX 886 LACOOCHEE, FL 33537 US FEI Number: 65-0371884 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JOHNSTON, DARRYL W 29 SOUTH BROOKSVILLE AVE BROOKSVILLE, FL 34601 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO () Delete () Change () Addition BARBOUR, SCOTT Name: Name: 29 SO BROOKSVILLE AVENUE Address: Address: City-St-Zip: BROOKSVILLE, FL 34601 US City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: BATES, KRIS J Name: 29 SO BROOKSVILLE AVENUE Address: Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SCOTT BARBOUR CEO 04/19/2005