## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1006

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DOCUI 1. Corporation	MENT #	P9400	0044	747	(1)							
TURNS	TONE, INC.											
Principal Place	of Business		Mailing	g Address				<del> </del>	ii digii dalif qelii			
5100 TOWN CENTER CIRCLE				5100 TOWN CENTER CIRCLE								
SUITE 330 BOCA RATOR	N EI 23486			E 330 A RATON F	1 22400							
DOOR HATOI	116 30400		<b>B</b> 000	A DATUR F	L 33400			3. Date Incorporate		3a. D	ate of Last F	
2 Principal Pla	ace of Business		20 140	iling Addres	10	-		06/15/1994 4. FEI Number			03/27/19	
1	acc or business		26	ming Addres	55			65-05235	18		<b>⊢</b> →	Applied For Not Applicable
Suite, Apt.	#, etc.			te, Apt. #, e	etc.			5. Certificate of Star				Additional
2			27									Required
City & State	9		28	y & State				6. Election Campaig  Trust Fund Contr				May Be
Zip		Country	Zip	)		Country		B. This corporation		intangible		d to Fees
4	25		29		30	Ì		Florida Statutes	Yes			100.002,
	9. Name and	Address of Curre	nt Registere	d Agent			Г	10. Name and Add	ress of New R	egistere	d Agent	
500.5						81	Name					
	iesident agen Iwn Center C					82	Street Add	lress (P.O. Box Number is	Not Acceptab	ile)		
SUITE 3		HICLE				B3						
	ATON FL 3348	6				0.4					· ''IT_ <del>-</del>	
		-				84	City			F	85   Z	p Code
or register	ed agent, or both,	in the State of Flori	ida. Such cha	ange was au	uthorized by	e above-r the corp	named corpo oration's boa	oration submits this staten and of directors. I hereby a	nent for the pur accept the app	noso of	changing ite	registered office I agent. I am
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Stuart Duncan, President 3/29/96 (407)361-9300

NATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date

Confirme Proper is true and accurate and that my signature shall have the same legal effect as if made under important of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name is a financial property of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name is a financial property of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name is a financial property of the corporation of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name is a financial property of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name is a financial property of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name is a financial property of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name is a financial property or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name is a financial property or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name is a financial property or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name is a financial property or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name is a financial property or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; a

SIGNATURE: