

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

Amended

053925

PROFIT CORPORATION ANNUAL REPORT 1999

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

DOCUMENT # P94000060198

1. Corporation Name

TURBINE PARTS SERVICES, INC.

99 JUL 23 PM 12:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
159 SHORE LINE DR
MARY ESTHER FL 32569
US

Mailing Address
P.O. BOX 261
MARY ESTHER FL 32569

2. Principal Place of Business
21 807 A South Drive
Suite, Apt. #, etc.
22 City & State
23 Ft. Walton Beach, FL
Zip Country
24 32547 25 U.S.

2a. Mailing Address
26 807 A South Drive
Suite, Apt. #, etc.
27 City & State
28 Ft. Walton Beach, FL
Zip Country
29 32547 30 U.S.

3. Date Incorporated or Qualified
08/11/1994

4. FEI Number
59-3262800

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
RAIA, PHILIP L
159 SHORE LINE DR
MARY ESTHER FL 32569

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
807 A South Drive
83
84 City
Ft. Walton Beach FL 85 Zip Code
32547

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 607.0508, Florida Statutes.

SIGNATURE *Philip L. Raia* DATE 7/20/99

12. OFFICERS AND DIRECTORS

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP |
|-------|----------------|-------------------|----------------|
| | RAIA, PHILIP L | 159 SHORE LINE DR | MARY ESTHER FL |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| 11 TITLE | 12 NAME | 13 STREET ADDRESS | 14 CITY-ST-ZIP |
|----------|----------------|----------------------|-----------------------|
| | | 122 Country Club Rd. | Shalimar, FL 32579 |
| 21 TITLE | 22 NAME | 23 STREET ADDRESS | 24 CITY-ST-ZIP |
| | Vice President | Judith Kemp | 122 Country Club Rd |
| | | | Shalimar, FL 32579 |
| 31 TITLE | 32 NAME | 33 STREET ADDRESS | 34 CITY-ST-ZIP |
| | | 100002952811--3 | -08/06/99--01070--003 |
| 41 TITLE | 42 NAME | 43 STREET ADDRESS | 44 CITY-ST-ZIP |
| | | | |
| 51 TITLE | 52 NAME | 53 STREET ADDRESS | 54 CITY-ST-ZIP |
| | | | |
| 61 TITLE | 62 NAME | 63 STREET ADDRESS | 64 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: *Philip L. Raia* DATE 7/20/99