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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000014850 (7)

TURNER MECHANICAL & ASSOCIATES CORP.

Principal Place of Business

674 NARANJA AVE

Mailing Address

674 NARANJA AVE

## **FILED** May 01 1998 8:00am Secretary of State



COCOA FL 32927		COCOA FL 32927			
				DO NOT WRITE IN T  3. Date Incorporated or Qualified	HIS SPACE
				02/12/1996	
2. Principal Pi	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 660	PONCE DE CEON	26 660 PONCE	DE LEON	59-3360602	Not Applicable
Sulte, Apt.		Suite, Apt. #, etc.	22 01-010		\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State	7 ,	8, Election Campaign Financing	\$5.00 May Be
23 6000	7 7 2	28 LOCOA 7	7	Trust Fund Contribution	Added to Fees
Zip <b>329</b>	27 - STY	7ip	Country	8. This corporation owes or has paid the	current year Inlangible
24 - 200	9. Name and Address of Curren	29 <i>3292</i> /	30 DREVARD	Personal Property Tax due June 30.	Yes No
OT/	<del></del>	i negisterea Agent	81 Name	10. Name and Address of New Registe	red Agent
	INFIELD, GERGORY T NARANJA AVE		- Name		
	COA FL 32927		82 Street Add	rese (P.O. Box Number is Not Acceptable)	
00	OUN FL SZBZI		83 66C	PONCE DE LEON	
			84 City	A. I	FL 85 Zip Code 7
11. Pursuant to	the provisions of Sections 607,050	2 and 607.1508. Florida Statute	s. the above-named corr	actation outpoits this statement for the number	
Office or re	gistered agent, or both, in the State of familiar with, and accept the obliga	of Florida. Such change was a	uthorized by the corporat	tion's board of directors. I hereby accept the	appointment as registered
-	riacililai with, and accept the onliga	alous or, acciron 607.0005, Flor	nua Statutes.		
SIGNATURE 5	Ignature, typed or printed name of registered age	nt and title it applicable (NOTE	Registered Agent signature requi	red when reinstating) DA	16.
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE		Change Addition
NAME	GREG STANFIELD		12 NAME	REG STANTIELD LO TONCE DE LEON	t
STREET ADDRESS	674 NARANJA AVE		1.3 STREET ADDRESS	60 HONCE DE CEON	
CITY-ST-ZIP	COCOA FL		1.4 CITY- ST - 7/P	OCOA 7L	
TITLE	VP	DELETE	21 TITLE		Change Addition
NAME	JAMES W NYCUM		2 2 NAME		
STREET ADDRESS	2203 DIAMOND DR		2.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL	T pereze	2. 4 CITY - ST - ZIP		
TITLE	ST Susan a lalley	☐ DELET <b>e</b>	3.1 TITLE	SUSAN A. LALLEY LO FONCE DE LEON	Change
NAME	674 NARANJA AVE		3.2 NAME	USAN A. CHECK	1.
STREET ADDRESS	COCOA FL		3.3 STREET ADDRESS	GO TONICE DE CION	<i>v</i>
CITY-ST-ZIP TITLE	OCCA IE	DELETE	3.4. CITY - SŦ - ZIP 4.1 TITŁE	OCOH TC	Change Addition
NAME			4.1 THEE		Change Addition
STREET ADDRESS	•		4.3 STREET ADDRESS		
CITY-ST-ZIP			4.5 STREET ADDRESS		
TITLE		DELETE	51 TITLE		Change Addition
NAME			5.2 NAME	I	the state of the s
STREET ADDRESS			5.3 STREET ADDRESS	J 11	
CITY-ST-ZIP			5.4 CITY - ST - ZIP	20211	
TITLE		☐ DELETE	,6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS	80000025098	3 <b>4</b> 8
CITY OF TID			A + DITH DT ZID	-05/04/9801088	·033
14. hereby ce	rtify that the information supplied wi	th this filing does not qualify for	the exemption stated in	Section 119.07.3(1) IOHO Statutes. I furthe	r certify that the information
officer or di	<b>n this annual report or supplemental</b>	l annual report is true an <b>d accu</b> iver or trustee empower <b>ed t</b> o ex	rate and that my signatur	re shall have the same legal effect as if made uired by Chapter 607, Florida Statutes; and the	a under nath: that I am an I