

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000032870

FILED  
May 01, 2005  
Secretary of State

Entity Name: TURN KEY CONTRACTING, INC.

## Current Principal Place of Business:

20038 CAUSEWAY BLVD.  
LAND O' LAKES, FL 34639

## New Principal Place of Business:

## Current Mailing Address:

20038 CAUSEWAY BLVD.  
LAND O' LAKES, FL 34639

## New Mailing Address:

FEI Number: 59-3418998

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SMITH, MARY  
2504 WEST FLETCHER  
TAMPA, FL 33618 US

## Name and Address of New Registered Agent:

SMITH, MARY  
20038 CAUSEWAY BLVD  
LAND O' LAKES, FL 34638 US

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:

05/01/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SMITH, MARY C  
Address: 20038 CAUSEWAY BLVD  
City-St-Zip: LAND O LAKES, FL 34639

Title: VP ( ) Delete  
Name: SMITH, JOHN C VP OPER  
Address: 20038 CAUSEWAY BLVD  
City-St-Zip: LAND O' LAKES, FL 34639

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: O'BRIEN, LARRY A  
Address: 20038 CAUSEWAY BLVD  
City-St-Zip: LAND O' LAKES, FL 34638

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: MARY C. SMITH

PRES

05/01/2005

Electronic Signature of Signing Officer or Director

Date