2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000031605

1. Entity Name
TURN KEY REALTY, INC.

Principal Place of Business

330 OFFICE 1B BUSINESS PKWY

ROYAL PALM BEACH, FL 33411 US

Mailing Address

169 SEAVIEW AVE

PALM BEACH, FL 33480 US

FILED
Jan 28, 2004 08:00 AM
Secretary of State



DO NOT WRITE IN THIS SPACE 01192004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0745156 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TURN KEY HOME BUILDERS, INC. 169 SEAVIEW AVE PALM BEACH, FL 33480

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the plicans of registered agent.	urpose of changing its registere	d office or f	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating)					DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	 Election Campaign Finance Trust Fund Contribution. 	cling 🖸	\$5.00 May Be Added to Fees	<u> </u>
10.	OFFICERS AND DIREC	TORS			711723704-80015-006 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MYURA, ANTHONY 169 SEAVIEW AVE PALM BEACH, FL 33480				·
TITLE NAME STREET ADDRESS CITY-SI-ZIP	V MYURA, DOUG 4840 ROYAL PALM BEACH BLVD ROYAL PALM BEACH, FL 33411				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		\$50 LLBB 7 T			

z. I nereby 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 report or suppliemental report is true and accurate and that my signature shall have the same legal effect as if made under orath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OPPRINTED NAME OF SIGNING OFFICER OR DIRECTOR

127/04 Days 54-832.4412