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

**PROFIT CORPORATION ANNUAL REPORT** 

1**9**98



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000086469 (8)

TURNER ENTERPRISES, INC.

## **FILED** Jun 22 1998 8:00am Secretary of State



Danie I Die	Deire	Mading Add					
Principal Place of Business Maifing Address							
1280 COURT STREET CLEARWATER FL 34616		1280 COURT STREET CLEARWATER FL 34616					
OCEANTAIC	172 34010	OLCANITATEN   C OTOTO			DO NOT WRITE IN THIS	SPACE	
					3. Date Incorporated or Qualified		
					10/07/1997		
2. Principal Place of Business 2a. Mailing Addres					4. FEI Number 59-3471280	Applied For	
Suite, Apt #, etc.		<b>26</b>		373777	Not Applicable		
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be		
23		28		Trust Fund Contribution	Added to Fees		
Zip	Country Zip C		Countr	79 8. This corporation owes or has paid the current year Intangible			
24	25 29 30		30		Personal Property Tax due June 30. Yes No		
g, Name and Address of Current Registered Agent  10, Name and Address of New Registered Agent  81 Name							
SCARFIA, MICHAEL J							
1280 COURT STREET			82	82 Street Address (P.O. Box Number is Not Acceptable)			
CLEARWATER FL 34616			83				
			0.	1			
3	• .		84	City	F	85 Zip Code	
11 Purtuant	to the provisions of Sections 607.05	02 and 607 1508 Florida Statu	les the abo	/e-named corr			
11. Purtuant 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.							
	en rannisar witti, and accept the only	ganions of Section boy 6505, r	iongia Statote	15.			
SIGNATURE	Signature typed or printed name or registered as	gent and lefe if applicable (NO	1) Registered Ag	ent signature requi	red when reinstating) DATE		
12.	OFFICERS AT	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	P	☐ DETELE	1.1 TITLE			Change Addition	
NAME	SCARFIA, MICHAEL J		1.2 NAME				
STREET ADDRESS	1280 COURT STREET		1.3 STREET ADDRESS				
CITY-ST-ZIP	CLEARWATER FL 34616		1.4 CITY -	S1-ZIP		E Observe E Market	
TITLE	•		2.1 TITLE			Change Addition	
NAME	SCARFIA, MICHELLE 1280 COURT STREET		2 2 NAME				
STREET ADDRESS	CLEARWATER FL 34616			T ADDRESS			
CITY-ST-ZIP TITLE	OLEANWAIEN PL 34010	DELETE	2. 4 CITY 3.1 TITLE	S1-2IP		☐ Change ☐ Addition	
NAME			3.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			3.4 CITY				
TITLE		DELETE	4.1 TITLE			Change Addition	
NAME			4 2 NAMI		والمناس والمال المناه والمناز والمناو والمناو والمناو والمناو والمناو	~	
STREET ADDRESS			43 STREE	1 ADDRESS	20000254353 -06/02/980101903		
CITY+ST-ZIP	<u></u>		4.4 CiTY+	ST-ZIP	-yp/u2/30u1013u3		
TITLE		DELFTE	5.1 TITLE		កកកស្លប្ប. ប្រមួ	☐ Change ☐ Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	1 ADDRESS		609	
CITY-ST-ZIP			5.4 CITY	ST-ZIP			
TITLE		DELETE	6.1 TITLE			☐ Change ☐ Addition	
NAME			6 2 NAME			) n	
STREET ADDRESS				1 ADDRESS		V <sub>0</sub> .	
CITY ST. 7IP	l		64 CHY-	ST-7IP I			

14. Thereby 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 conformation 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 true an all address.

4-13-98