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 # P97000086925 (9)

TURBINE WORKS, INC.

Principal Place of Business

Mailing Address

FILED Mar 05 1998 8:00am Secretary of State



i inicipal i lac	CO OI DUSINOSS	waning A	Mailing Address				
29 SOUTH BROOKSVILLE AVENUE BROOKSVILLE FL 34601			29 SOUTH BROOKSVILLE AVENUE BROOKSVILLE FL 34601				
0.100.101.12		ONOONO	VILLE 1 E 01001				DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualified
							10/06/1997
2. Principal Place of Business 2a. Mailing Address							4. FEI Number Applied For
21		26	26				59-3478958 Not Applicat
Suite, Apt.	#, etc.	Suite,	Suite, Apt. #, etc.				\$9.75 Additional
22		27					5. Certificate of Status Desired Fee Required
City & Star	te	City &	City & State				6. Election Campaign Financing \$5.00 May Be
23		28					Trust Fund Contribution Added to Fees
Zip	Country	Zip		Count	ry		8. This corporation owes or has paid the current year Intangible
24	25	29		30			Personal Property Tax due June 30. Yes X No
	9, Name and Address of Curi	rent Registered A	lgent				10. Name and Address of New Registered Agent
JO	HN\$TON, DARRYL W			8	1 N	lame	
29		0	82 Street Address (P.O. Box Number is Not Acceptable)				
	OOKSVILLE FL 34601				32 Sheet Address (F.O. Box Number is Not Acceptable)		
3.,				8:	3		
				8	4 C	ity	FI 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607 1508	8 Florida Statu	tes the abo	VA-08	amed coroo	pration pulposite this statement for the purpose of changing its registers
office or i agent. I a	registered agent, or both, in the Stam familiar with, and accept the ob	ate of Florida. Suc ligations of, Section	h change was on 607.0505, F	authorized t lorida Statuti	oy thi	e corporatio	on's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicat	ble (NO	TE: Registered A	gent si	gnature required	d when reinstating) DATE
12.	OFFICERS A	ND DIRECTORS		13.		 	A MAN OF SICHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE			DELETE	1.1 TITLE	C		OF EVERNHUE OFFICER Change L'Additi
NAME				1.2 NAME			of G. BARBOUR
STREET ADDRESS				1.3 STREE	FY ANN		125 CORTER BIVD.
CITY-ST-ZIP				1.4 CITY-		. 3.	Poskswill Et 24/mi
TITLE		. , ,,	DELETE	2.1 TITLE		P) PR	Rookswile, FC 34601 ESiDENT Change PAdditi
NAME				2,2 NAME		1/2	man A. Vi'DAL
STREET ADDRESS				2.3 STREE		0000	RMAN A . VI'DAL 1125 CORTE & BLUD.
CITY-ST-ZIP				2.4 CITY		in A	ROOKS VILLE, FL. 34601
TITLE			DELETE	3.1 TITLE		· •	☐ Change ☐ Additi
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREE			
CITY-ST-ZIP			DELETE	3.4. CITY- 4.1 TITLE		r l	☐ Change ☐ Additi
			المادة المادة	***************************************			
NAME PERSON ADDRESS				4. 2 NAMI			
STREET ADDRESS				4.3 STREE			
CITY-ST-ZIP	-		DELETE	4.4 CITY -	ST - ZH	<u> </u>	The same
TITLE			THI DETECT	5.1 TITLE			Change Additi
NAME				5.2 NAME			
STREET ADORESS				5.3 STREE			
CITY-ST-ZIP			17 051 5	5.4 CITY -	ST-ZIF	<u> </u>	
TITLE			∐ DELETE	6.1 TITLE		-	☐ Change ☐ Addition
NAME	$\mathcal{L}_{i} = \mathcal{L}_{i}$			6.2 NAME			
STREET ADDRESS				6.3 STREE	T ADD	RESS	
CITY-ST-ZIP				6.4 CITY-	ST-ZIF		
14. I hereby of	certify that the information supplied	with this filing do	es not qualify for	or the exemp	ption	stated in Se	section 119.07(3)(i), Florida Statutes. I further certify that the information shall have the same legal effect as if made under oath; that I am an
officer or a	di recto r of the corporation or the re	iceiver or trustee a	of berewoome	execute this	rend	ort as requir	red by Chapter 607, Florida Statutes; and that my name appears in
Block 12 (or Block 13 if changed, or on an at	tachment with an	nddress.	merid	6.	+	
	Juman	u. UKK	ا رسام	recu	w	4	alialas (200) 700 mass