

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S09608

FILED  
Jan 26, 2010  
Secretary of State

**Entity Name:** TURRELL, HALL & ASSOCIATES, INC.

**Current Principal Place of Business:**

3584 EXCHANGE AVE  
NAPLES, FL 341043732

**New Principal Place of Business:**

**Current Mailing Address:**

3584 EXCHANGE AVE.  
SUITE B  
NAPLES, FL 341043732

**New Mailing Address:**

3584 EXCHANGE AVE  
NAPLES, FL 341043732

**FEI Number:** 65-0235211

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TURRELL, TODD T.  
3584 EXCHANGE AVE.  
SUITE B  
NAPLES, FL 34104 US

**Name and Address of New Registered Agent:**

TURRELL, TODD T.  
3584 EXCHANGE AVE.  
NAPLES, FL 34104 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:

01/26/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PSD  
Name: TURRELL, TODD T  
Address: 3584 EXCHANGE AVE.  
City-St-Zip: NAPLES, FL 34104

Title: VPTD  
Name: HALL, TIMOTHY  
Address: 3584 EXCHANGE AVE.  
City-St-Zip: NAPLES, FL 34104

Title: TR  
Name: KITCHENER, MARIELLE  
Address: 3584 EXCHANGE AVE.  
City-St-Zip: NAPLES, FL 34104

I hereby 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 all other like empowered.

SIGNATURE: MARIELLE KITCHENER

TR

01/26/2010

Electronic Signature of Signing Officer or Director

Date