

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S22462

Entity Name: TURTLE INDUSTRIES, INC.

FILED  
Jan 06, 2005  
Secretary of State

**Current Principal Place of Business:**

1875 12TH ST SE  
LARGO, FL 33771 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1858  
LARGO, FL 33779

**New Mailing Address:**

FEI Number: 04-2591023      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ANDO, CARMEN S.  
3697 42 MD WAY SO  
BLDG 60-A&B  
SAINT PETERSBURG, FL 33711 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: ANDO, CARMEN,  
Address: 3697-42ND WAY SO #60A  
City-St-Zip: ST. PETERSBURG, FL

Title: S ( ) Delete  
Name: ANDO, DAVID G.,  
Address: 6892 122ND AVE NORTH  
City-St-Zip: LARGO, FL

Title: T ( ) Delete  
Name: ANDO, THOMAS G.,  
Address: 4172 41ST ST NORTH  
City-St-Zip: ST PETERSBURG, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: T (X) Change ( ) Addition  
Name: CAMERON, KEVIN A,  
Address: 4805 W LAUREL STREET #100  
City-St-Zip: TAMPA, FL

Title: SD (X) Change ( ) Addition  
Name: ANDO, THOMAS G.,  
Address: 4172 41ST ST NORTH  
City-St-Zip: ST PETERSBURG, FL

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: CARMEN S ANDO

DP

01/06/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date