

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000040891

Entity Name: TURNER DISTRIBUTION OF CENTRAL GA/AL, LLC

Current Principal Place of Business:

317 INDUSTRIAL BLVD.
THOMASVILLE, GA 31792

Current Mailing Address:

PO BOX 1427
THOMASVILLE, GA 31799-1427

FEI Number: 58-0673620

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

NRAI SERVICES, INC
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name TURNER, JR., S. RUSSELL
Address PO BOX 1427
City-State-Zip: THOMASVILLE GA 31799-1427

Title COMPTROLLER
Name CHAD, FIZGERALD
Address PO BOX 1427
City-State-Zip: THOMASVILLE GA 31799-1427

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TURNER, JR., S. RUSSELL

PRESIDENT

03/04/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date