2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 25, 2005 8:00 am
Secretary of State
07-25-2005 90106 033 ***158.75

DOCUMENT # F03000000684

1. Entity Name
FULLARD ENVIRONMENTAL CONTROLS, INC.

Principal Place of Business	Mailing Address
2004 SHORT STREET FORD CITY, PA 16226	2004 SHORT STREET FORD CITY, PA 16226

07212005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
304 5th Avenue	304 5th Avenue
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Ford City, PA	City & State: Ford City, PA
Zip: 16226 Country: USA	Zip: 16226 Country: USA

4. FEI Number 25-1892980 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PETERSON, B. KENT
348 US HIGHWAY ONE
OAK HILL, FL 32759

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable) 2362 Melonie Trail

City New Smyrna Beach, FL Zip Code 32168

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CP FULLARD, MICHAEL 2004 SHORT STREET FORD CITY, PA 16226	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	 412 Willow Court Apollo, PA 15613	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VCVP PETERSON, B. KENT 27 ORCHARD ROAD WHEELING, WV 26003	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	 1562 Network Drive Canonsburg, PA 15317	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby 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 report or supplemental 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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X [signature] Michael Fullard 7/21/05 7247638654
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #