

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 08, 2007 8:00 am
Secretary of State

02-08-2007 90055 015 ***158.75

DOCUMENT # J11296	
1. Entity Name WILLIAM E. TULLY, III, INC.	

Principal Place of Business 10625 QUAIL RIDGE DR SAINT AUGUSTINE FL 32095 US	Mailing Address 10625 QUAIL RIDGE DR SAINT AUGUSTINE FL 32095 US
PONTE VEDRA FL 32081	PONTE VEDRA, FL 32081

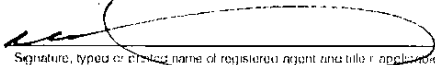


2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

1st MOORE CR2E034 (10/06)

4. FEI Number 59-2688768	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent TULLY, WILLIAM E., III 10625 QUAIL RIDGE DR SAINT AUGUSTINE FL 32095 PONTE VEDRA, FL 32081	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

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.

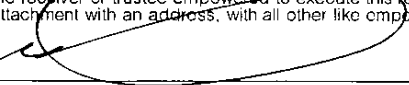
SIGNATURE  (NOTE: Registered Agent signature required when reinstating) DATE **1-29-07**

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY ST ZIP	V TULLY, WILLIAM E., JR. 2722 SUNNYBROOK RD. JACKSONVILLE FL 32216 ☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☒ Change ☒ Addition 10625 QUAIL RIDGE DR PONTE VEDRA, FL 32081
TITLE NAME STREET ADDRESS CITY ST ZIP	PD TULLY, WILLIAM E. III 10625 QUAIL RIDGE DR SAINT AUGUSTINE FL 32095 ☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☒ Change ☒ Addition PONTE VEDRA, FL 32081
TITLE NAME STREET ADDRESS CITY ST ZIP	ST TULLY, DONNA LYNN 10625 QUAIL RIDGE DR SAINT AUGUSTINE FL 32095 ☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☒ Change ☒ Addition PONTE VEDRA, FL 32081
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 exemptions contained in Section 119, 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:  DATE **1-29-07** 954-824-6371
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #