


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 18, 2004 08:00 AM
Secretary of State

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|---|---|
| DOCUMENT # P02000024284 1. Entity Name CULMAN ENTERPRISES, P.A. |  |
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| Principal Place of Business 1080 BAL HARBOR BLVD 9C PUNTA GORDA, FL 33950-6559 | Mailing Address 1133 BAL HARBOR BLVD. #1139 PUNTA GORDA, FL 33950-6559 |
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01242004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

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| 4. FEI Number 03-0397375 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent MARJORIE CULMAN 1133 BAL HARBOR BLVD. UNIT 1139 PUNTA GORDA, FL 33950 | DO NOT WRITE IN THIS SPACE |
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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 Martorie Culman MARTORIE CULMAN 3-1-04
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
After May 1, 2004 Fee will be \$550.00**

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

U00000091426
03/18/04-80008-010 150.00

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PT CULMAN, LOUIS P 1133 BAL HARBOR BLVD. PUNTA GORDA, FL 33950 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VPS CULMAN, MARJORIE 1133 BAL HARBOR BLVD. PUNTA GORDA, FL 33950 |
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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: Louis P. Culman 1/26/04 (703) 803-7565
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #