

FILED
May 23, 2003 8:00 am
Secretary of State

04-23-2003 90120 009 ***150.00

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000134604

1. Entity Name
BULLS DEVELOPMENT COMPANY



55043191

Principal Place of Business
**78 WALNUT CREEK LANE
 KILLEN AL 35645**

Mailing Address
**P O BOX 613
 KILLEN AL 35645**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 613
 Suite, Apt. #, etc.

City & State
Killem, AL.

Zip
35645

Country
Lowderdale

4. FEI Number
16-1667459

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

8. Name and Address of Current Registered Agent
**OMETRIAS D LONG & ASSOCIATES, P.A.
 400 PARK AVE S, STE 104
 WINTER PARK FL 32789**

7. Name and Address of New Registered Agent
 Name **Ometrias D Long - Associates, PA.**
 Street Address (P.O. Box Number is Not Acceptable)
400 Park Avenue S, STE 104
 City **Winter Park, FL, FL** Zip Code **32789**

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 re-registering) DATE _____

FILE NOW!!! FEE IS \$150.00
 After May 1, 2003 Fee will be \$350.00
 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Roderick E. Bulls, Sr. <input type="checkbox"/> Delete President 78 Walnut Creek Lane Killem, AL. 35645
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President <input type="checkbox"/> Delete Roderick E. Bulls, Jr. 78 Walnut Creek Lane Killem, AL. 35645
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary <input type="checkbox"/> Delete Linda E. Bulls 78 Walnut Creek Lane Killem, AL. 35645
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 lists empowered.

SIGNATURE: Roderick E. Bulls, Sr. **Roderick E. Bulls, Sr.** **4/21-03** **256-757-7222**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CREEDON (10/02)