2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 04, 2008 8:00 am Secretary of State

DOCUMENT # 250705 1. Entity Name TAYLOR & FULTON, INC.			·				02-04-2008 90060 012 ***150.00			00	
Principal Place of Business 932 5TH AVE.			Mailing Address P.O. BOX 1087								
PALMETTO, FL 34221			PALMETTO, FL 34220 US				Beni beni istii galti si	N 8181 8 81 8 8 8	SII CIRI) BIIIII	EEL (II DE TI	
2. Principal Place of Business - No P.O. Box #			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			01162008	Chg-P	CR2E034			
City & State			City & State			4. FEI Numbe 59-094	59-0946630		Not	Applicable	
Zip	Country		Zip Country		nty		of Status Desired	Fe	3.75 Addi e Required		
	6. Name and Addr	ess of Current R	egistered Agent		Name	7. Name and	Address of New F	Registered Age	ent		
TAYLOR, J 932 5TH AV	Έ.		Street Address			ss (P.O. Box Numbe	(P.O. Box Number is Not Acceptable)				
PALMETTO	1, FL 33561										
					City			FL	Zip Code	1	
	named entity submits to		the purpose of changing it	ts register	ed office or regi	istered agent, or bo	th, in the State of Fl	lorida. I am fan	niliar with, a	and accept	
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 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees											
10.		OFFICERS AND E		11.		ADDITIONS,	CHANGES TO OF				
1	STD TAYLOR, JM		☐ Delete TITU		i i			L) Change	Addition	
L I	932 5TH AVE. PALMETTO, FL 3	4221		EET ADDRESS Y-ST-ZIP							
1	PD TAYLOR BL	☐ Delete 1/1						Change	☐ Addition		
	TAYLOR, RJ 932 5TH AVE.	ST		EET ADDRESS							
 	PALMETTO, FL 3	4221	C⊓Y ☐ Delete TITL		Y-ST-ZIP				Change	☐ Addition	
1	QUILLIAN, MILLA	RD B.	L_I Delete	NA)				_	_1 cliange	L_1 Addition	
STREET ADDRESS 932 5 AVE W CITY-ST-ZIP PALMETTO, FL					REET ADDRESS Y-ST-ZIP						
-	V		☐ Delete	TITE	LE				Change	☐ Addition	
NAME STREET ADDRESS	PARRISH, REESE 932 5TH AVE.			NA/ STR	ME REET ADDRESS						
CITY-ST-ZIP	PALMETTO, FL 3	4221		CIT	Y-ST-ZIP	***					
1	V MONETTE, WILLIA	AM	☐ Delete	TITI NAI					Change	Addition	
STREET ADDRESS	932 5TH AVE.		l l	REET ADDRESS							
CITY-ST-ZIP	PALMETTO, FL 3	4221	☐ Delete	ווט דוד	Y-ST-ZIP				Change	Addition	
NAME				N4I	_			_		_	
STREET ADDRESS CITY-ST-ZIP			<u> </u>	CIT	Y-ST-ZIP						
12. I hereby condicated	ertify that the informat on this report or supp	ion supplied with lemental report is	this filling does not qualify true and accurate and tha	for the ex	xemptions conta ature shall have	ained in Chapter 11 the same legal effe	9, Florida Statutes, ct as if made under	I further certify r oath; that I am	that the in an officer	nformation or director	
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 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 appropried by 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 appears, with all other like embowered.											
SIGNATURE: SIGNATURE: SIGNATURE NO TYPED OR PRINTED NAME OF SIGNING OFFICER DR DIRECTOR R JA 9 7A 9 Loc 1/3 / 05 94/ 729 3853 Date Dayling Proce +											