2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # 588286

1. Entity Name
CARROLL FULMER MANAGEMENT CO., INC.

Principal Place of Business	Mailing Address
8340 AMERICAN WAY GROVELAND, FL 34736 US	P.O. BOX 625 GROVELAND, FL 34736 US

01052006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2497278
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

FULMER, TIMOTHY
13045 SUGAR BLUFF RD
CLERMONT, FL 34711

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

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	VP
NAME	TURNER, CYNTHIA
STREET ADDRESS	12928 LOOKINGBILL LN
CITY-ST-ZIP	ATHENS, AL 35611
TITLE	VP
NAME	FULMER, PHILLIP R
STREET ADDRESS	8000 CHERRY LAKE ROAD
CITY-ST-ZIP	GROVELAND, FL
TITLE	VP
NAME	FULMER, CARROLL A
STREET ADDRESS	11610 OSPREY POINTS BLVD
CITY-ST-ZIP	CLERMONT, FL 34711
TITLE	PRES
NAME	FULMER, TIMOTHY A
STREET ADDRESS	13045 SUGAR BLUFF RD
CITY-ST-ZIP	CLERMONT, FL 34711
TITLE	EVP
NAME	FULMER, BARBABA B.
STREET ADDRESS	11050 AUTUMN LN
CITY-ST-ZIP	CLERMONT, FL 34711
TITLE	CB
NAME	FULMER, CARRROLL L
STREET ADDRESS	11050 AUTUMN LN
CITY-ST-ZIP	CLERMONT, FL 34711

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04/29/06-80186-005 158.75

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12. I hereby certify that the information supplied with this filing 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 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: Timothy A. Fulmer 4-7-2006 352-429-5000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #