

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 588286

FILED
Feb 11, 2009
Secretary of State

Entity Name: CARROLL FULMER MANAGEMENT CO., INC.

Current Principal Place of Business:

8340 AMERICAN WAY
GROVELAND, FL 34736 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 625
GROVELAND, FL 34736 US

New Mailing Address:

FEI Number: 59-2497278 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FULMER, TIMOTHY
13045 SUGAR BLUFF RD
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

FULMER, TIMOTHY
13045 SUGAR BLUFF RD
CLERMONT, FL 34711 US

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.

SIGNATURE: TIMOTHY FULMER

02/11/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: TURNER, CYNTHIA,
Address: 12928 LOOKINGBILL LN
City-St-Zip: ATHENS, AL 35611

Title: VP () Delete
Name: FULMER, PHILLIP R
Address: 8000 CHERRY LAKE ROAD
City-St-Zip: GROVELAND, FL

Title: VP () Delete
Name: FULMER, CARROLL A,
Address: 11610 OSPREY POINTS BLVD
City-St-Zip: CLERMONT, FL 34711

Title: PRES () Delete
Name: FULMER, TIMOTHY A
Address: 13045 SUGAR BLUFF RD
City-St-Zip: CLERMONT, FL 34711

Title: EVP () Delete
Name: FULMER, BARBABA B.,
Address: 11050 AUTUMN LN
City-St-Zip: CLERMONT, FL 34711

Title: CB () Delete
Name: FULMER, CARRROLL L
Address: 11050 AUTUMN LN
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY A. FULMER

PRES

02/11/2009

Electronic Signature of Signing Officer or Director

Date