

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 02, 2005 8:00 am**  
**Secretary of State**

05-02-2005 90540 049 \*\*\*150.00

**DOCUMENT # F04000004555**

1. Entity Name  
**FULMER LOGISTICS CORPORATION**



Principal Place of Business  
**1895 90TH AVENUE  
VERO BEACH, FL 32966**

Mailing Address  
**1895 90TH AVENUE  
VERO BEACH, FL 32966**

**50046502**



04272005 No Chg-P CR2E034 (10/03)

4. FEI Number  
**20-1168877**

Applied For  
Not Applicable

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

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

**FULMER, ZACKARIAH G  
1895 90TH AVENUE  
VERO BEACH, FL 32966**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

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, 2005 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	FULMER, ZACKARIAH
STREET ADDRESS	3366 - 58TH AVENUE
CITY - ST - ZIP	VERO BEACH, FL 32966
TITLE	V
NAME	CUMBEE, ALAN
STREET ADDRESS	2883 S. OSCEOLA AVENUE
CITY - ST - ZIP	ORLANDO, FL 32806
TITLE	TSC
NAME	FULMER, MACKARIAH
STREET ADDRESS	1141 WINDSONG ROAD
CITY - ST - ZIP	ORLANDO, FL 32809
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**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)(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 like empowered.

**SIGNATURE:** *Zack G. Fulmer Sr.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*4/29/05*

Date

*772-562-7014*

Daytime Phone #