

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000073385

FILED  
Jul 31, 2008  
Secretary of State

Entity Name: FULLER MANAGEMENT GROUP LLC

## Current Principal Place of Business:

9364 SE 7TH AVE. RD.  
OCALA, FL 34480

## New Principal Place of Business:

25 MARBORO ROAD  
SOUTH BOROUGH, MA 01772

## Current Mailing Address:

9364 SE 7TH AVE. RD.  
OCALA, FL 34480

## New Mailing Address:

25 MARBORO ROAD  
SOUTH BOROUGH, MA 01772

FEI Number: 26-0122192      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

FULLER, HEBE  
9364 SE 7TH AVE. RD.  
OCALA, FL 34480      US

## Name and Address of New Registered Agent:

FULLER, HEBE  
25 MARBORO ROAD  
SOUTH BOROUGH, MA, FL 01772      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: HEBE FULLER

07/31/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR      ( ) Delete  
Name: FULLER, HEBE  
Address: 9364 SE 7TH AVE. RD  
City-St-Zip: Ocala, FL 34480

Title: MGRM      ( ) Delete  
Name: FULLER, DAVID  
Address: 9364 SE 7TH AVE RD  
City-St-Zip: Ocala, FL 34480

## ADDITIONS/CHANGES:

Title: MGR      (X) Change ( ) Addition  
Name: FULLER, HEBE  
Address: 25 MARBORO ROAD  
City-St-Zip: SOUTH BOROUGH, MA 01772

Title: MGRM      (X) Change ( ) Addition  
Name: FULLER, DAVID  
Address: 25 MARBORO ROAD  
City-St-Zip: SOUTH BOROUGH, MA 01772

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: HEBE FULLER

MGR

07/31/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date