## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# L27664

FILED Jan 08, 2007 Secretary of State

Entity Name: FULTON AGENCY, INC.								
Current Principal Place of Business:				N	New Principal Place of Business:			
	AMPLE ROAPRINGS, FL							
Current Mailing Address:				N	New Mailing Address:			
	AMPLE ROPRINGS, FL							
FEI Number:	65-0164669	FEI Nu	umber Applied For()	FEI Numbe	er Not Applic	cable ( )	Certificate of Status Desired ( )	
Name and	Address o	f Current	Registered Agent:	N	ame and	Address of	New Registered Agent:	
FULTON, I 8750 NW 6 POMPANC		L 33067	US					
The above in the State		ty submits	this statement for the	purpose of cl	hanging its	s registered	office or registered agent, or both,	
SIGNATUR	RE:							
	Elect	ronic Signa	ature of Registered Ag	ent			Date	
Election Can	npaign Financ	ing Trust F	und Contribution ( ).					
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	CEO FULTON, DE 8750 NW 68 POMPANO E	TH CT	33067	Na Ad	tle: ame: ldress: ty-St-Zip:	FULTON, DE. 8750 NW 68	· · · · · · · · · · · · · · · · · · ·	
Title: Name: Address: City-St-Zip:	VD WIGGIN, CA 1613 SW 10 FT LAUDER	TH CT		Ad	tle: ame: ldress: ty-St-Zip:	,	()Change ()Addition	
Title: Name: Address: City-St-Zip:	PD MEYERS, D 4922 NW 11 CORAL SPR	3 AVE.	3076	Na Ad	tle: ame: ldress: ty-St-Zip:	•	()Change ()Addition	
Title: Name: Address: City-St-Zip:	STD FULTON, VA 8750 NW 68 POMPANO I	TH CT	33067	Na Ad	tle: ame: ldress: ty-St-Zip:	FULTON, VAI 8750 NW 68	•	
Title:	VD	( ) Delete		Tit	·le·		( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

SIGNATURE: DEAN C FULTON PRES 01/08/2007

BRUMM, MARIÉ

1448 NE 30 COURT

POMPANO BCH, FL

Name:

Address:

City-St-Zip: