2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# L27664

Address:

City-St-Zip:

FILED Apr 29, 2007 Secretary of State

Entity Nar	me: FULTON	AGENCY, INC.			
Current Principal Place of Business:			New Princip	New Principal Place of Business:	
9742 W. SAMPLE ROAD CORAL SPRINGS, FL 33065			SUITE 202	5401 N UNIVERSITY DR SUITE 202 CORAL SPRINGS, FL 330674636	
Current Mailing Address:			New Mailing	New Mailing Address:	
9742 W. SAMPLE ROAD CORAL SPRINGS, FL 33065			SUITE 202	5401 N UNIVERSITY DR SUITE 202 CORAL SPRINGS, FL 330674636	
FEI Number:	: 65-0164669	FEI Number Applied For ()	FEI Number Not Applic	able () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and A	Address of New Registered Agent:	
FULTON, 1 8750 NW 6 POMPANO		33067 US			
	named entity s e of Florida	submits this statement for the p	ourpose of changing its	registered office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS	CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () FULTON, DEAN 8750 NW 68TH POMPANO BEA	СТ	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () WIGGIN, CARO 1613 SW 10TH FT LAUDERDAL	CT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STD () FULTON, VALE 8750 NW 68TH POMPANO BEA	СТ	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () BRUMM, MARIE 1448 NE 30 CO POMPANO BCH	URT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	()	Delete		VD () Change (X) Addition FULTON, MARK A	

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.

Address:

City-St-Zip:

980 SW 69TH AVENUE PLANTATION, FL 33317

SIGNATURE: DEAN C. FULTON **PRES** 04/29/2007