

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L77451

FILED
Jan 06, 2004
Secretary of State

Entity Name: FULLER, FULLER & ASSOCIATES, P.A.

Current Principal Place of Business:

1111 LINCOLN ROAD
SUITE 802
MIAMI BEACH, FL 33139

New Principal Place of Business:

12000 BISCAYNE BOULEVARD
609
NORTH MIAMI, FL 33181

Current Mailing Address:

1111 LINCOLN ROAD
SUITE 802
MIAMI BEACH, FL 33139

New Mailing Address:

12000 BISCAYNE BOULEVARD
609
NORTH MIAMI, FL 33181

FEI Number: 65-0180425

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FULLER, LAWRENCE A.
1111 LINCOLN ROAD
SUITE 802
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

FULLER, LAWRENCE A.
12000 BISCAYNE BOULEVARD
609
NORTH MIAMI, FL 33181 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:

01/06/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FULLER, LAWRENCE A.,
Address: 1111 LINCOLN RD.
City-St-Zip: MIAMI BEACH, FL

Title: D () Delete
Name: FULLER, JOHN P
Address: 1111 LINCOLN RD #802
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FULLER, LAWRENCE A
Address: 12000 BISCAYNE BOULEVARD, SUITE 609
City-St-Zip: NORTH MIAMI, FL 33181

Title: D (X) Change () Addition
Name: FULLER, JOHN P
Address: 12000 BISCAYNE BOULEVARD, SUITE 609
City-St-Zip: NORTH MIAMI, FL 33181

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LAWRENCE A. FULLER

D

01/06/2004

Electronic Signature of Signing Officer or Director

Date