

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000053011

FILED
Apr 29, 2008
Secretary of State

Entity Name: CULP FAMILY PROPERTIES, INC.

Current Principal Place of Business:

9612 SUNBEAM CENTER DR.
JACKSONVILLE, FL 32257

New Principal Place of Business:

9957 MOORINGS DRIVE
104
JACKSONVILLE, FL 32257

Current Mailing Address:

9612 SUNBEAM CENTER DR.
JACKSONVILLE, FL 32257

New Mailing Address:

9957 MOORINGS DRIVE
104
JACKSONVILLE, FL 32257

FEI Number: 59-3660169

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLS, NANCY C
9612 SUNBEAM CENTER DR.
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

MILLS, NANCY C
9957 MOORINGS DRIVE
104
JACKSONVILLE, FL 32257 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: NANCY C. MILLS

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CULP, JAMES D
Address: 9612 SUNBEAM CENTER DR
City-St-Zip: JACKSONVILLE, FL 32257

Title: VPST () Delete
Name: CULP, NANCY S
Address: 9612 SUNBEAM CENTER DR
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CULP, JAMES D
Address: 9957 MOORINGS DRIVE #104
City-St-Zip: JACKSONVILLE, FL 32257

Title: VPST (X) Change () Addition
Name: CULP, NANCY S
Address: 9957 MOORINGS DRIVE #104
City-St-Zip: JACKSONVILLE, FL 32257

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.

SIGNATURE: JAMES D. CULP

P

04/29/2008

Electronic Signature of Signing Officer or Director

Date