

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2007 8:00 am
Secretary of State

05-14-2007 90092 047 ***150.00

DOCUMENT # P03000133475

1. Entity Name
CULLER ENTERPRISES, INC.



Principal Place of Business

**109 GREENWING TEAL CT
DAYTONA BCH, FL 32119**

Mailing Address

**109 GREENWING TEAL CT
DAYTONA BCH, FL 32119**

40113154



2. Principal Place of Business - No P.O. Box #

727 N. Atlantic Ave

3. Mailing Address

727 N Atlantic Ave

05022007

Chg-P

CR2E034 (12/06)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Daytona Beach, FL

City & State

Daytona Beach, FL

Zip

32118

Country

Zip

32118

Country

4. FEI Number

20-0399171

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

5. Name and Address of Current Registered Agent

**CULLER, RUSTY M
109 GREENWING TEAL CT
DAYTONA BCH, FL 32119**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

3 Oceans West Blvd #304

City

Daytona Beach Shores FL

Zip Code

32118

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME CULLER, RUSTY M
STREET ADDRESS 109 GREENWING TEAL CT
CITY-ST-ZIP DAYTONA BCH, FL 32119

TITLE VP ☐ Delete
NAME CULLER, MITCHELL D
STREET ADDRESS 109 GREENWING TEAL CT
CITY-ST-ZIP DAYTONA BEACH, FL 32119

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 3 Oceans West Blvd, #304
CITY-ST-ZIP Daytona Beach Shores, FL 32118

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 727 N. Atlantic Ave
CITY-ST-ZIP Daytona Beach, FL 32118

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Mitchell D Culler

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/10/07

Date

386-255-5249

Daytime Phone #