

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000014441

FILED  
Jan 03, 2008  
Secretary of State

Entity Name: CULLEN TECHNOLOGY SOLUTIONS, INC.

**Current Principal Place of Business:**

7210 ULMERTON ROAD  
SUITE E  
LARGO, FL 33771

**New Principal Place of Business:**

**Current Mailing Address:**

3925 38TH STREET S  
ST PETERSBURG, FL 33711

**New Mailing Address:**

FEI Number: 34-2032985      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CULLEN, WILLIAM M  
3925 38TH STREET SOUTH  
ST. PETERSBURG, FL 33711      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CULLEN, LEE E  
Address: 5170 FOXBRIDGE CIR N APT 341  
City-St-Zip: CLEARWATER, FL 33760

Title: ST ( ) Delete  
Name: CULLEN, LEE B  
Address: 3925 38TH STREET S  
City-St-Zip: ST PETERSBURG, FL 33711

Title: D ( ) Delete  
Name: CULLEN, WILLIAM M  
Address: 3925 38TH STREET S  
City-St-Zip: ST PETERSBURG, FL 33711

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: CULLEN, LEE E  
Address: 5214 HOMER STREET  
City-St-Zip: CLEARWATER, FL 33760

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: WILLIAM M CULLEN

D

01/03/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date