## 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Secretary of State DOCUMENT # P06000106518 02-08-2007 90057 008 \*\*\*150.00 FULMER DRY CLEANERS, INC Principal Place of Business Mailing Address 50 EAST JOINER ST WINTER GARDEN FL 34787 50 EAST JOINER ST WINTER GARDEN FL 34787 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/06) 1st MOORE City & State City & State Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Dosired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KIEHM, SUSAN E 221 NORTH LAKEVIEW AVE Street Address (P.O. Box Number is Not Acceptable) **WINTER GARDEN FL 34787** City Zip Codo 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 SIGNATURE Signature, typed or printed name of registered agent and tille if applicable (NOTE, Registered Agent signature required when re-instating) FILE NOW!!! FEE IS \$150,00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. MÆ ☐ Delate Addition HH. Change | KIEHM, SUSAN E MALE NAME 221 NORTH LAKEVIEW AVE STREET ADDRESS SIRFE! ADDRESS WINTER GARDEN FL 34787 CITY-ST-71P CITY-SI-7IP HILE Detele nne ☐ Change ■ Addition GOLD, LINDA J NAM NAME 221 NORTH LAKEVIEW AVE. STREET ADDRESS SIREET ADDRESS WINTER GARDEN FL 34787 CITY ST-ZIP CITY - St - ZIP 3118 ☐ Defete 1671 £ ☐ Channe Addition MARK NAMI STREET ADDRESS STREET ADDRESS CITY-ST-70P CHY-SI-79 HILE ☐ Delete HILE ☐ Change ☐ Addition NAME. NAME STREET ADDRESS STREET ADORESS CHY-SI-ZIP CITY - ST - ZIP MŒ Delete 1000 ☐ Change Addition STREET ADDRESS SIRCE LADORESS CITY-SI-ZIP CITY-SI-71P HDF Delete HILL ☐ Change ■ Addition NAME NAME STREET ADORESS STRUE, FADOTESS CITY - S1- ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 eath; 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: 407-342-5209

FILED

Feb 26, 2007 8:00 am