

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P31030

Entity Name: THE TAULMAN COMPANY

FILED
Jan 20, 2004
Secretary of State

Current Principal Place of Business:

561 THORNTON RD.
SUITE E
LITHIA SPRINGS, GA 30122 US

New Principal Place of Business:

1831 VETERANS MEMORIAL HWY
AUSTELL, GA 30168 US

Current Mailing Address:

PO BOX 696
LITHIA SPRINGS, GA 30122 US

New Mailing Address:

FEI Number: 58-1907154 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: S () Delete
Name: GLASS, PATRICIA E
Address: 561 THORNTON RD.
City-St-Zip: LITHIA SPRINGS, GA 30122

Title: PCT () Delete
Name: GLASS, ROBERT J
Address: 561 THORNTON RD.
City-St-Zip: LITHIA SPRINGS, GA 30122

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: GLASS, PATRICIA E
Address: 1831 VETERANS MEMORIAL HWY
City-St-Zip: AUSTELL, GA 30168

Title: PCT (X) Change () Addition
Name: GLASS, ROBERT J
Address: 1831 VETERANS MEMORIAL HWY
City-St-Zip: AUSTELL, GA 30168

Title: VP () Change (X) Addition
Name: SPICER, GUY K
Address: 1831 VETERANS MEMORIAL HWY
City-St-Zip: AUSTELL, GA 30168

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: ROBERT J. GLASS

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01/20/2004

Electronic Signature of Signing Officer or Director

Date