

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 20, 2004 08:00 AM
Secretary of State

DOCUMENT # P93000066030

1. Entity Name
PACT REAL ESTATE CORPORATION OF GA

Principal Place of Business
8340 AMERICAN WAY
GROVELAND, FL 34736 US

Mailing Address
P.O. BOX 625
GROVELAND, FL 34736 US



01072004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3208159

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PHILIP R. FULMER
8000 CHERRY LAKE ROAD
GROVELAND, FL 34736

**DO NOT WRITE
IN THIS SPACE**

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 re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	EVP
NAME	FULMER, BARBARA B
STREET ADDRESS	11050 AUTUMN N
CITY-ST-ZIP	CLERMONT, FL 34711
TITLE	P
NAME	TURNER, CYNTHIA F
STREET ADDRESS	12928 LOOKINGBILL LN
CITY-ST-ZIP	ATHENS, AL 35611
TITLE	S
NAME	FULMER, PHILIP R
STREET ADDRESS	8000 CHERRY LAKE ROAD
CITY-ST-ZIP	GROVELAND, FL
TITLE	VP
NAME	FULMER, CARROLL A
STREET ADDRESS	11610 OSPREY POINTE BLVD
CITY-ST-ZIP	CLERMONT, FL 34711
TITLE	VP
NAME	FULMER, TIMOTHY A
STREET ADDRESS	13045 SUGAR BLUFF RD
CITY-ST-ZIP	CLERMONT, FL 34711
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Carroll A. Fulmer

Vice President

1-15-04

352-429-5000

Date

Daytime Phone #