2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2004 08:00 AM
Secretary of State

DOCUMENT # P94000009262

1. Entity Name
PACT REAL ESTATE CORPORATION OF C.A.

Principal Place of Business	Mailing Address
8340 AMERICAN WAY GROVELAND, FL 34736	PO BOX 625 GROVELAND, FL 34736

01072004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3222508
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

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

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	P
NAME	FULMER, BARBARA B
STREET ADDRESS	11050 AUTUMN LN
CITY-ST-ZIP	CLERMONT, FL 34711
TITLE	VP
NAME	TURNER, CYNTHIA F
STREET ADDRESS	12928 LOOKINGBILL LANE
CITY-ST-ZIP	ATHENS, AL 35611
TITLE	VP
NAME	FULMER, PHILIP R
STREET ADDRESS	8000 CHERRY LAKE RD.
CITY-ST-ZIP	GROVELAND, FL 34736
TITLE	S
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	COB
NAME	FULMER, CARROLL L.
STREET ADDRESS	11050 AUTUMN LN
CITY-ST-ZIP	CLERMONT, FL 34711

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01/20/04-80071-022 158.75

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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: Carroll A. Fulmer Secretary 1-15-04 352-429-5000
SIGNATURE AND TYPED OR PRINTED NAME OF MANAGING OFFICER OR DIRECTOR — Date — Daytime Phone #