

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000069291

FILED  
Apr 13, 2004  
Secretary of State

Entity Name: FULLER FINANCIAL SERVICES, INC.

## Current Principal Place of Business:

6900 N SOUTH POINT DR  
STE 550  
JACKSONVILLE, FL 32216

## New Principal Place of Business:

## Current Mailing Address:

6900 N SOUTH POINT DR  
STE 550  
JACKSONVILLE, FL 32216

## New Mailing Address:

FEI Number: 59-3410021

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CRAWFORD, JOHN R  
225 WATER STREET #900  
JACKSONVILLE, FL 32202 US

## Name and Address of New Registered Agent:

CRAWFORD, JOHN R  
1200 RIVERPLACE BLVD.  
SUITE 800  
JACKSONVILLE, FL 32207 US

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:

04/13/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: FULLER, A R JR  
Address: 6900 N SOUTHPOINT DR STE 550  
City-St-Zip: JACKSONVILLE, FL 32216

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change ( ) Addition  
Name: FULLER, A R JR  
Address: 6900 N SOUTHPOINT DR STE 550  
City-St-Zip: JACKSONVILLE, FL 32216

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: A ROY FULLER JR

O

04/13/2004

Electronic Signature of Signing Officer or Director

Date