2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE

FILED Apr 14, 2005 08:00 AM DOCUMENT # P96000090956 **Secretary of State** 1. Entity Name ULLRICH, INC. Principal Place of Business Mailing Address 318 RACETRACK RD NW FORT WALTON BEACH FL 32547 318 RACETRACK RD NW FORT WALTON BEACH FL 32547 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. CR2E034 (10/04) 1st MOORE City & State Cîty & State 4. FEI Number Applied For 59-3438316 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HELMICH, ESQ, KEVIN M Street Address (P.O. Box Number is Not Acceptable) 4481 LEGENDÄRY DRIVE STE 200 DESTIN FL 32541 City Zip Code 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 1 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 reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. D TITLE ☐ Delete DILE Change Addition ULLRICH, RICHARD E NAME NAME *UDD00030376*1 314 BROOKS ST. SE STREET ADDRESS STREET ADDRESS :::4/14/05-80016-007 150.00 CITY-ST-ZIP FORT WALTON BEACH FL 32548 CITY-ST-ZIP THILE D Delete TUTER Change Addition NAME ULLRICH, PAMELA L NAME STREET ADDRESS 314 BROOKS ST. SE STREET ADDRESS FORT WALTON BEACH FL 32548 CITY-ST-7IP CITY-ST-ZIP TITLE Defete TITLE Change Addition NAME NAME ULLRICH, CHADWICK D STREET ADDRESS STREET ADDRESS 1892 GREYSTONE LN CITY-ST-ZIP CITY-ST-ZIP FORT WALTON BEACH FL 32547 TITLE Delete ☐ Change ☐ Addition ULLRICH, JOSHUA F 835 WHITROCK LANE STREET ADDRESS STREET ADDRESS FORT WALTON BEACH FL 32547 CITY ST-ZIP CITY-ST-ZIP TITLE Delete DDF Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHTY-ST-7/F TITLE □ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY ST-ZIE 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes 1 further certify that the information indicated on this report or supplied that it was an 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 of the received or trustee employee and accurate 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 a

Davime Phone #