

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 16, 2001 8:00 am**  
**Secretary of State**

05-16-2001 90390 010 \*\*\*150.00

A0068291

**DOCUMENT #** 001060003366 ✓  
**1. Entity Name**  
 FULLER Properties - INC.

**Principal Place of Business**  
 32819 Wolf's Tr.  
 Sorrento FL  
 32776  
**Mailing Address**  
 PO Box 633  
 EUSTIS FL  
 32727-0633

**2. Principal Place of Business**  
 32819 Wolf's Tr.  
 Suite, Apt. #, etc.  
**3. Mailing Address**  
 PO Box 633  
 Suite, Apt. #, etc.  
 EUSTIS

**City & State**  
 Sorrento  
**City & State**  
 EUSTIS FL  
**Zip** 32776 **Country** USA  
**Zip** 32727-0633 **Country** USA

**4. FEI Number**  
 Applied For  
 Not Applicable

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

**6. Name and Address of Current Registered Agent**  
 GEORGE H. FULLER  
 32819 Wolf's Tr.  
 Sorrento FL 32776

**7. Name and Address of New Registered Agent**  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City FL 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.**  
**SIGNATURE** GEORGE FULLER Vice President 4/28/01  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.** ☐  
 (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

**10. Election Campaign Financing Trust Fund Contribution.** ☐ **\$5.00 May Be Added to Fees**

**11. OFFICERS AND DIRECTORS**

|   |                                 |
|---|---------------------------------|
| <b>TITLE</b><br>President<br>MARCI M. FULLER<br>32819 Wolf's Tr.<br>Sorrento FL 32776 | <input type="checkbox"/> Delete |
| <b>TITLE</b><br>V-President<br>George Fuller<br>32819 Wolf's Tr.<br>Sorrento FL 32776 | <input type="checkbox"/> Delete |
| <b>TITLE</b><br>Secretary<br>MARC FULLER<br>same                                      | <input type="checkbox"/> Delete |
| <b>TITLE</b><br>Treasurer<br>George Fuller<br>same                                    | <input type="checkbox"/> Delete |
| <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                 | <input type="checkbox"/> Delete |
| <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                 | <input type="checkbox"/> Delete |

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

|   |   |
|---|---|
| <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

**13. 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.**

**SIGNATURE:** [Signatures] 4/28/01 352-2237  
 Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (11/00)