

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000002344

FILED
Jan 30, 2009
Secretary of State

Entity Name: FULKS TAX & ACCOUNTING SERVICES, INC.

Current Principal Place of Business:

5823 26TH STREET WEST
BRADENTON, FL 34207

New Principal Place of Business:

5214 BIMINI DR
BRADENTON, FL 34210

Current Mailing Address:

5823 26TH STREET WEST
BRADENTON, FL 34207

New Mailing Address:

5214 BIMINI DR
BRADENTON, FL 34210

FEI Number: 65-0036624

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FULKS, CHARLES O
5823 26TH STREET WEST
BRADENTON, FL 34207 US

Name and Address of New Registered Agent:

FULKS, CHARLES O
5214 BIMINI DRIVE
BRADENTON, FL 34210 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: CHARLES O FULKS

01/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: ST () Delete
Name: FULKS, CHARLES O
Address: 5823 26TH STREET WEST
City-St-Zip: BRADENTON, FL 34207

Title: PD () Delete
Name: FULKS, JOANN M
Address: 5823 26TH STREET WEST
City-St-Zip: BRADENTON, FL 34207

Title: VP () Delete
Name: LOSTETTER, KIMBERLY
Address: 5823 26TH STREET W
City-St-Zip: BRADENTON, FL 34207

Title: T () Delete
Name: FORSBURG, SUZIE M
Address: 5823 26TH STREET W
City-St-Zip: BRADENTON, FL 34207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST (X) Change () Addition
Name: FULKS, CHARLES O
Address: 5214 BIMINI DRIVE
City-St-Zip: BRADENTON, FL 34210

Title: PD (X) Change () Addition
Name: FULKS, JOANN M
Address: 5214 BIMINI DRIVE
City-St-Zip: BRADENTON, FL 34210

Title: VP (X) Change () Addition
Name: LOSTETTER, KIMBERLY
Address: 5214 BIMINI DRIVE
City-St-Zip: BRADENTON, FL 34210

Title: T (X) Change () Addition
Name: FORSBURG, SUZIE M
Address: 5214 BIMINI DRIVE
City-St-Zip: BRADENTON, FL 34210

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CHARLES O FULKS

ST

01/30/2009

Electronic Signature of Signing Officer or Director

Date