2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000034983

Name:

Address:

City-St-Zip:

MENA, CAROLYN

9306 NW 2ND ST

CORAL SPRINGS, FL 33071

Entity Name: FULTON INSURANCE AGENCY, INC.

FILED Mar 26, 2009 Secretary of State

Current P	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
	SAMPLE ROA PRINGS, FL 3				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
P.O. BOX CORAL SI	9893 PRINGS, FL 3	330759893			
FEI Number	: 65-0828290	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
The above	D, FL 33067 named entity e of Florida.	US submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
		nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PDS (FULTON, VALI 8750 NW 68TH PARKLAND, F	H COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SOLER, CARN 8431 NW 26TH		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title [.]	VD () Delete	Title [.]	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: VALERIE L. FULTON PRES 03/26/2009