2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2007
Secretary of State

DOCUMENT# S97254

Entity Name: TULLIS PROPERTIES, INC.

Current Principal Place of Business:

1230 S MYRTLE AVE
SUITE 301
CLEARWATER, FL 34617 US

New Principal Place of Business:

Current Mailing Address:

56 REGINA ST. N
WATERLOO, CANADA, ON N2J 3A3 CA

New Mailing Address:

FEI Number: 58-1971858 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PRATESI, EMIL G.
1253 PARK ST
CLEARWATER, FL 34616 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	DPT	( ) Delete
Name:	CARTER, WILLIAM S	
Address:	304 SHAKESPEARE DR	
City-St-Zip:	WATERLOO, ON N2L 2V1 CA	
Title:	VPD	( ) Delete
Name:	CARTER, URSULA A	
Address:	304 SHAKESPEARE DR.	
City-St-Zip:	WATERLOO, ON N2L 2V1 CA	
Title:	SD	( ) Delete
Name:	WARREN, ROBERT L	
Address:	266 SHAKESPEARE DR.	
City-St-Zip:	WATERLOO, ON N2L 2T6 CA	
Title:	VPD	( ) Delete
Name:	CARTER, WILLIAM A	
Address:	100 ST. CHARLES ST. E.	
City-St-Zip:	MARYHILL, ON NOB 2BO CA	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM S. CARTER DPT 02/07/2007

Electronic Signature of Signing Officer or Director Date