

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V08213

FILED
Apr 27, 2006
Secretary of State

Entity Name: CULLER'S COPY CORNER, INC.

Current Principal Place of Business:

1635 HENDRY STREET
FT MYERS, FL 33901 US

New Principal Place of Business:

Current Mailing Address:

1635 HENDRY STREET
FT MYERS, FL 33901 US

New Mailing Address:

FEI Number: 65-0307824

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CULLER, CARL L
14851 CRYSTAL COVE COURT
FORT MYERS, FL 33919 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: PRES () Delete
Name: CULLER, STEPHEN L PRES
Address: 119 NE 20TH COURT
City-St-Zip: CAPE CORAL, FL 33909 US

Title: TR () Delete
Name: CULLER, CARL L TR
Address: 14851 CRYSTAL COVE COURT
City-St-Zip: FORT MYERS, FL 33919 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CULLER, STEPHEN L PRES
Address: 17021 UPRIVER DRIVE
City-St-Zip: FORT MYERS, FL 33917 US

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: STEPHEN L CULLER

PRES

04/27/2006

Electronic Signature of Signing Officer or Director

Date