


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000138255
 1. Entity Name
 STEVE PUMPHREY INC.



Principal Place of Business Mailing Address
 15277 NW FLOSSIE PUMPHREY LANE 15277 NW FLOSSIE PUMPHREY LANE
 ALTHA, FL 32421 ALTHA, FL 32421

DO NOT WRITE IN THIS SPACE



04252005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
 76-0748172 Not Applicable

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

6. Name and Address of Current Registered Agent
 PUMPHREY, STEVE
 15277 NW FLOSSIE PUMPHREY LANE
 ALTHA, FL 32421

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	PUMPHREY, STEVE
STREET ADDRESS	15277 NW FLOSSIE PUMPHREY LANE
CITY - ST - ZIP	ALTHA, FL 32421
TITLE	V
NAME	PUMPHREY, STEVEN
STREET ADDRESS	15282 N.W. WILLIAMS RD., LOT 8
CITY - ST - ZIP	ALTHA, FL 32421
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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 04/29/05-80097-015 150.00

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Steve Pumphrey 4/29/05 450-557-9502
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #