

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000040198

FILED  
Apr 19, 2012  
Secretary of State

Entity Name: PURE POSSIBILITIES, INC.

**Current Principal Place of Business:**

12344 NEELD ST.  
BROOKSVILLE, FL 34614

**New Principal Place of Business:**

**Current Mailing Address:**

12344 NEELD ST.  
BROOKSVILLE, FL 34614

**New Mailing Address:**

FEI Number: 59-3651804      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TAYLOR, ANDREW T II  
12344 NEELD STREET  
WEEKI WACHEE, FL 34614      US

**Name and Address of New Registered Agent:**

TAYLOR, SAMANTHA A  
12344 NEELD STREET  
WEEKI WACHEE, FL 34614      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: SAMANTHA A TAYLOR      04/19/2012  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: PVST  
Name: TAYLOR, SAMANTHA A  
Address: 12344 NEELD ST.  
City-St-Zip: BROOKSVILLE, FL 34614

Title: D  
Name: TAYLOR, SAMANTHA A  
Address: 12344 NEELD ST.  
City-St-Zip: BROOKSVILLE, FL 34614

Title: CM  
Name: TAYLOR, SAMANTHA A  
Address: 12344 NEELD ST.  
City-St-Zip: BROOKSVILLE, FL 34614

I hereby 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 all other like empowered.

SIGNATURE: SAMANTHA A TAYLOR      PRES      04/19/2012  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date