

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # F04000006201

1. Entity Name
ENPURICON, INC.



Principal Place of Business
**2431 SCHIEFFELIN ROAD
APEX, NC 27502**

Mailing Address
**2431 SCHIEFFELIN ROAD
APEX, NC 27502**



01042006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
56-1531403

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	PVC
NAME	JONES, RANDALL G
STREET ADDRESS	104 HEDWIG COURT
CITY-ST-ZIP	CARY, NC 27511
TITLE	VP
NAME	KIRBY, PAUL D
STREET ADDRESS	303 LOCHSIDE DRIVE
CITY-ST-ZIP	CARY, NC 27511
TITLE	C
NAME	SLATE, TERRY E
STREET ADDRESS	1310 OLIVE CHAPEL ROAD
CITY-ST-ZIP	APEX, NC 27502
TITLE	S
NAME	HOFFMAN, DAVID A
STREET ADDRESS	45 WRIGHT PLACE
CITY-ST-ZIP	CLINTON, NC 28328
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000413168
02/10/06-80078-003 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Randall G. Jones* **Randall G. Jones, President**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/23/2006 919-387-9700

Date Daytime Phone