


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 11, 2007 08:00 AM**  
**Secretary of State**

|                                   |   |
|-----------------------------------|---|
| DOCUMENT # F04000006201           |  |
| 1. Entity Name<br>ENPURICON, INC. |   |

|  |  |
|--|--|
| Principal Place of Business<br>2431 SCHIEFFELIN ROAD<br>APEX, NC 27502 | Mailing Address<br>2431 SCHIEFFELIN ROAD<br>APEX, NC 27502 |
|--|--|



01032007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

|  |                               |
|--|-------------------------------|
| 4. FEI Number<br>56-1531403  | Applied For<br>Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required |                               |

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|--|
| 6. Name and Address of Current Registered Agent<br><br>C T CORPORATION SYSTEM<br>1200 SOUTH PINE ISLAND ROAD<br>PLANTATION, FL 33324 |
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

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

| 10. OFFICERS AND DIRECTORS                         |   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | PVC<br>JONES, RANDALL G<br>104 HEDWIG COURT<br>CARY, NC 27511   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | VP<br>KIRBY, PAUL D<br>303 LOCHSIDE DRIVE<br>CARY, NC 27511     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | C<br>SLATE, TERRY E<br>1310 OLIVE CHAPEL ROAD<br>APEX, NC 27502 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | S<br>HOFFMAN, DAVID A<br>45 WRIGHT PLACE<br>CLINTON, NC 28328   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |   |

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01/11/07-80013-010 150.00

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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 reports 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 officers, with all other like empowered.

SIGNATURE: RANDALL G. JONES, PRESIDENT 1/8/07 919-387-9700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

RANDALL G. JONES, PRESIDENT