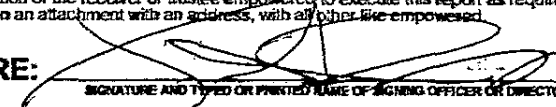


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 14, 2006 08:00 AM
Secretary of State

DOCUMENT # J71514 1. Entity Name PURCELL'S DISTRIBUTORS, INC.		
Principal Place of Business 9010 ASTRONAUT BLVD CAPE CANAVERAL, FL 32920 US	Mailing Address 9010 ASTRONAUT BLVD CAPE CANAVERAL, FL 32920 US	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent PURCELL, VAN A 1460 CANAVERAL COURT MERRITT ISLAND, FL 32952		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 re-registering)		
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 P NAME PURCELL, VAN STREET ADDRESS 1460 CANAVERAL CT. CITY-ST-ZIP MERRITT ISLAND, FL 32952	U00000509740 04/28/06-80055-020 150.00 DO NOT WRITE IN THIS SPACE	
TITLE ST NAME PURCELL, ERIC C. STREET ADDRESS 115 GATOR DR CITY-ST-ZIP MERRITT ISLAND, FL 32953		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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:  Van A. Purcell 4/10/06 321-784-4195 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		



01042006 No Chg-P CRZE034 (11/05)

4. FEI Number 59-2806210	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required