

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J78744

Entity Name: PURVIS, INC.

FILED
Mar 01, 2009
Secretary of State

Current Principal Place of Business:

% STEPHEN G. SEWELL
907 WEBSTER STREET
LEESBURG, FL 34748

New Principal Place of Business:

33202 COUNTY RD 473
LEESBURG, FL 34788

Current Mailing Address:

% STEPHEN G. SEWELL
907 WEBSTER STREET
LEESBURG, FL 34748

New Mailing Address:

FEI Number: 59-2818478

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEWELL, STEPHEN G.
907 WEBSTER ST.
LEESBURG, FL 34748 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PURVIS, ELSIE LEE,
Address: 12466 PINE ISLAND DR.
City-St-Zip: LEESBURG, FL

Title: DST () Delete
Name: PURVIS, RONALD G.,
Address: 12466 PINE ISLAND DR.
City-St-Zip: LEESBURG, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ELSIE LEE PURVIS

P

03/01/2009

Electronic Signature of Signing Officer or Director

Date