

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**Apr 28, 2008 08:00 AM  
Secretary of State**

**DOCUMENT # L04000010112**

1. Entity Name  
**PURPOSE DRIVEN, LLC**



Principal Place of Business

**4108 DRIFTING SAND TRAIL  
DESTIN, FL 32541**

Mailing Address

**4108 DRIFTING SAND TRAIL  
DESTIN, FL 32541**



04092008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

**56-2434945**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**BALDREE, JOAN  
4108 DRIFTING SAND TRAIL  
DESTIN, FL 32541**

**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

*Joan Baldree*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

**4-1-08**  
DATE

**FILE NOW!!! FEE IS \$138.75  
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>MGRM BALDREE, JOAN K 4108 DRIFTING SAND TRAIL DESTIN, FL 32541</b>
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U00000924613  
05/19/08-80008-014 138.75

**DO NOT WRITE  
IN THIS SPACE**

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

*Joan Baldree*

Date

Daytime Phone #

**4-1-08**