

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000002588

FILED
Apr 30, 2003
Secretary of State

Entity Name: ON PURPOSE INC.

Current Principal Place of Business:

5560 ARNOLD PALMER DRIVE
#518
ORLANDO, FL 32811

New Principal Place of Business:

1850 AMERICUS MINOR DRIVE
WINTER GARDEN, FL 34787

Current Mailing Address:

P.O. BOX 616447
ORLANDO, FL 32861

New Mailing Address:

FEI Number: 59-3605161

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, DEBORA L
5560 ARNOLD PALMER DRIVE
#518
ORLANDO, FL 32811 US

Name and Address of New Registered Agent:

JOHNSON, DEBORA L
1850 AMERICUS MINOR DRIVE
ORLANDO, FL 34787 US

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: DEBORA L JOHNSON

04/30/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JOHNSON, DEBORA L
Address: 5560 ARNOLD PALMER DRIVE, #618
City-St-Zip: ORLANDO, FL 32811

Title: VPD () Delete
Name: FISHER, NICOLE
Address: 6464 REDWOOD OAK DRIVE
City-St-Zip: ORLANDO, FL 32818

Title: SD () Delete
Name: BRANDON-BOLES, VARIAN
Address: 8846 SKY VISTA COURT
City-St-Zip: ORLANDO, FL 32818

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JOHNSON, DEBORA L
Address: 1850 AMERICUS MINOR DRIVE
City-St-Zip: WINTER GARDEN, FL 34787

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 for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBORA L JOHNSON

PD

04/30/2003

Electronic Signature of Signing Officer or Director

Date