


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2006 8:00 am**  
**Secretary of State**

05-02-2006 90166 006 \*\*\*150.00

<b>DOCUMENT # P00000017738</b> 1. Entity Name <b>THE PURE GUAVA TRADING COMPANY, INC.</b>					
Principal Place of Business <b>796 Beachview Drive</b> <b>Boca Grande, FL 33921</b>			Mailing Address <b>P.O. Box 41</b> <b>Placida, FL 33946</b>		
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.		04212006    Chg-P    CR2E034 (11/05)	
City & State  Zip      Country		City & State  Zip      Country		4. FEI Number <b>65-0992000</b> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent <b>Kohl, Dean</b> <b>50 So. Kindred Street</b> <b>Ste 107</b> <b>Stuart, FL 34995</b>	
7. Name and Address of New Registered Agent Name <b>Richard R. Gans, Esq.</b> Street Address (P.O. Box Number is Not Acceptable) <b>Ferguson, Skipper, Shaw, et al.</b> <b>1515 Ringling Boulevard, 10th Floor</b> City <b>Sarasota</b> FL    Zip Code <b>34236</b>				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 _____ DATE <b>4/21/06</b> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP <b>DP</b> <b>KEATHLEY, TERRY M</b> <b>796 BEACH VIEW DR.</b> <b>PLACIDA, FL 33946</b>		TITLE NAME STREET ADDRESS CITY - ST - ZIP <b>DTS</b> <b>Keathley, Patricia</b> <b>796 Beachview Drive</b> <b>Placida, FL 33946</b>		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE NAME STREET ADDRESS CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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 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: <b>TERRY M. KEATHLEY</b> <b>APRIL 28, 06</b> <b>941 628-2807</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #</small>					

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