2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT# P01000105256

1. EntityName
E&RDESIGN&PURCHASE,INC.

PrincipalPlaceofBusiness
7621SOUTHWICKST.
ORLANDO,FL32818

MailingAddress
1583EASTSILVERSTARRD.
PMB165
OCOEE,FL34761

DO NOT WRITE IN THIS SPACE

01162004 NoChg-P CR2E034(10/03)

4. FEINumber
59-3754109
☐ AppliedFor
☐ NotApplicable

5. CertificateofStatusDesired ☐ **$8.75** Additional FeeRequired

6. NameandAddressofCurrentRegisteredAgent

DAVEY,CATHERINEEESQ
151LOOKOUTPLACE,STE.200
MAITLAND,FL32751

DO NOT WRITE IN THIS SPACE

8. Theabovenamedentitysubmitsthisstatementforthepurposeofchangingitsregisteredofficeorregisteredagent,orboth,intheStateofFlorida.Iamfamiliarwith,andaccept theobligationsofregisteredagent.

SIGNATURE _____ DATE
Signature,typedorprintednameofregisteredagentandtitleifapplicable. (NOTE RegisteredAgentsignaturerequiredwhenre instating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. ElectionCampaignFinancing TrustFundContribution. ☐ **$5.00** MayBe AddedtoFees

U00000120193
04/19/04-80124-010 150.00

10. OFFICERSANDDIRECTORS

TITLE	D
NAME	REMILLARD,RANDY
STREETADDRESS	125BRANSCOMEBLVD.
CITY-ST-ZIP	WILLIAMSBURG,VA23185
TITLE	D
NAME	ELLINGTON,CAROLINE
STREETADDRESS	2648CHILTONPLACE
CITY-ST-ZIP	CHARLOTTE,NC28207
TITLE	
NAME	
STREETADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREETADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREETADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREETADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. Ihereby certify that the information supplied with this filing does not qualify 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 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; an dthatmynameappearsinBlock 10orBlock 11if changed,oronanattachmentwith anaddress,withallotherlikeempowered.

SIGNATURE: Caroline L Ellington 4/16/04
SIGNATUREANDTYPEDORPRINTEDNAMEOFSIGNINGOFFICERORDIRECTOR Date DaytimePhone#