


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 02, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P03000030900</b> 1. Entity Name PURPOSE DRIVEN BUSINESS GROUPS, INC	
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Principal Place of Business 8713 54TH AVENUE E BRADENTON, FL 34211 US	Mailing Address 8713 54TH AVENUE E BRADENTON, FL 34211 US
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**DO NOT WRITE IN THIS SPACE**



04262007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1178391	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  JIM GAY, CPA 3984 MANATEE AVE E BRADENTON, FL 34208
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**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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	U000000755568 05/22/07-80104-022 150.00
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<b>10. OFFICERS AND DIRECTORS</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES LIGHT, DONALD R 8713 54TH AVENUE E BRADENTON, FL 34211
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA LIGHT, LINDA M 8713 54TH AVENUE E BRADENTON, FL 34211
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC LIGHT, LINDA M 8713 54TH AVENUE E BRADENTON, FL 34211
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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.

<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<i>4/30/07</i> Date	<i>941-753-3239</i> Daytime Phone #
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