

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P03000054068

1. Entity Name
JIM PURCELL & ASSOCIATES, INC.



Principal Place of Business
1807 PRINCETON LAKES DR APT 307
BRANDON, FL 33511

Mailing Address
1807 PRINCETON LAKES DR APT 307
BRANDON, FL 33511

2. Principal Place of Business
12310 ADVENTURE DR
Suite, Apt. #, etc.

3. Mailing Address
12310 ADVENTURE DR
Suite, Apt. #, etc.

City & State
RIVERVIEW, FL 33569

City & State
RIVERVIEW, FL 33569

Zip
USA

Zip
USA

4. FEI Number
83-0362135

Applied For
Not Applicable

5. Certificate of Status Desired
 **\$8.75 Additional
Fee Required**



03182005 Chg-P CR2E034 (10/03)

6. Name and Address of Current Registered Agent

PURCELL, JIMMY B
1807 PRINCETON LAKES DR APT 307
BRANDON, FL 33511

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)

12310 ADVENTURE DR
City
RIVERVIEW

FL Zip Code
33569

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
PURCELL, JIM
1807 PRINCETON LAKES BLVD #307
BRANDON, FL 33511**

Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

Change Addition

**12310 ADVENTURE DR
RIVERVIEW, FL 33569**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

12. I hereby 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; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

Jim Purcell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-23-05 863-221-3533

Date

Daytime Phone #