

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000043648

FILED
Feb 02, 2009
Secretary of State

Entity Name: PURPOSE FINANCIAL GROUP, INC.

Current Principal Place of Business:

5104 N LOCKWOOD RIDGE RD, STE 201
SARASOTA, FL 34234 US

New Principal Place of Business:

5104 N LOCKWOOD RIDGE RD,
SUITE 201
SARASOTA, FL 34234 US

Current Mailing Address:

5104 N LOCKWOOD RIDGE RD, STE 201
SARASOTA, FL 34234 US

New Mailing Address:

5104 N LOCKWOOD RIDGE RD,
SUITE 201
SARASOTA, FL 34234 US

FEI Number: 20-0857021

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CARICO, PAUL J
7732 ASHLEY CIRCLE
SARASOTA, FL 34201 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: UCCELLO, SALVATORE JR.
Address: 3658 QUIET POND LANE
City-St-Zip: SARASOTA, FL 34235 US

Title: CO-P () Delete
Name: CARICO, PAUL J
Address: 7732 ASHLEY CIRCLE
City-St-Zip: SARASOTA, FL 34201 US

Title: S () Delete
Name: CARICO, PAUL J
Address: 7732 ASHLEY CIRCLE
City-St-Zip: SARASOTA, FL 34201 US

Title: T () Delete
Name: UCCELLO, SALVATORE JR.
Address: 3658 QUIET POND LANE
City-St-Zip: SARASOTA, FL 34235 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V.P. (X) Change () Addition
Name: CARICO, PAUL J
Address: 7732 ASHLEY CIRCLE
City-St-Zip: SARASOTA, FL 34201 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TRES (X) Change () Addition
Name: UCCELLO, SALVATORE JR.
Address: 3658 QUIET POND LANE
City-St-Zip: SARASOTA, FL 34235 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SALVATORE UCCELLO JR.

PRES

02/02/2009

Electronic Signature of Signing Officer or Director

_____ Date