**FILE NOW: FILING FEE AFTER MAY 1 IS $225.00**

ANNUAL REPORT

**1995**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 PM 1:43

DOCUMENT # **P94000072927 (4)**

1. Entity Name

**PURDUE & ASSOCIATES, INC.**

Principal Place of Business

1300 SAWGRASS VILLAGE CIRCLE
SUITE 16
PONTE VEDRA BEACH FL 32082

Mailing Address

1300 SAWGRASS VILLAGE CIRCLE
SUITE 16
PONTE VEDRA BEACH FL 32082

(Filed With the State)

3. Date Incorporated / Qualified: **09/30/1994**

3a. Date Last Report:

2. Principal Place of Business — 21

2a. Mailing Address — 26

4. FEI Number: **59-3296022** — Applied For / Not Applicable

Suite, Apt. # or — 22

Suite, Apt. # or — 27

5. Certificate of Status Desired [ ] — **$8.75** Additional Fee Required

City, State — 23

City, State — 28

6. Election Campaign Financing Trust Fund Contribution [ ] — **$5.00** May Be Added to Fees

24 — 25 — 29 — 30

8. The corporation has been, or is simultaneously being, qualified to transact business in Florida. [ ] Yes [ ] No

9. Name and Address of Current Registered Agent

SMITH, PARKER B
1300 SAWGRASS VILLAGE CIRCLE
SUITE 16
PONTE VEDRA BEACH FL 32082

10. Name and Address of New Registered Agent

81 Name

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

83

84 City — **FL** — 85 Zip Code

11. (If applicable) Pursuant to the provisions of Section 607.1505, Florida Statutes, the undersigned corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The name and address of the registered office and the name and address of the registered agent, as changed, are set forth above. I hereby certify that the corporation has authorized the officers or directors to execute this statement.

SIGNATURE

12. OFFICER AND DIRECTORS

PTD
PURDUE, DANNY
PO BOX 331301 N/A
ATLANTIC BEACH FL 32233

VD
TROUTMAN, LEE
PO BOX 331301 N/A
ATLANTIC BEACH FL 32233

SD
BATES, ROBERT
PO BOX 331301 N/A
ATLANTIC BEACH FL 32233

13. ADDITIONS, CHANGES TO OFFICERS AND/OR DIRECTORS

[ ] Change [ ] Addition

REMITTED BY MAY 1

14. I hereby certify that the information supplied with this report is true, complete and accurate, and that all taxes and fees due and payable by the corporation to the Department of State, including but not limited to, corporate income tax, sales tax, use tax, intangible tax, and documentary stamp tax, have been paid or provision for payment has been made. I am familiar with and authorized to sign this report on behalf of the corporation.

**SIGNATURE:** [signature]

SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR OFFICER

4/28/95

904-249-5012

0401064 FP