

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000066253 (2)

1. Corporation Name

PURVIS DATA PROS, INC.



Principal Place of Business

Mailing Address

104 ORANGE BLOSSOM CIRCLE  
ALTAMONTE SPRINGS FL 32779

104 ORANGE BLOSSOM CIRCLE  
ALTAMONTE SPRINGS FL 32779

3. Date Incorporated or Qualified

08/25/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 104 Orange Blossom Circle

26 104 Orange Blossom Circle

4. FEI Number

59-7055653

Applied for

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.03?  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KELLEY, GARLA  
2787 WEST STATE ROAD 434  
LONGWOOD FL 32779

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Special Agent in Charge of registered agent and, if applicable,

(If not, Registered Agent signature required when registering)

Date

12. OFFICERS AND DIRECTORS

TITLE D  
NAME PURVIS, MARYBETH  
STREET ADDRESS 104 ORANGE BLOSSOM CIRCLE  
CITY - ST - ZIP ALTAMONTE SPRINGS FL 32779-14

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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NAME  
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CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE James N. Purvis  
1.2 NAME  
1.3 STREET ADDRESS 104 Orange Blossom Circle  
1.4 CITY - ST - ZIP Altamonte Springs, FL 32714

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Marybeth A. Purvis*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/17/96

(407) 788-0789

Date

Phone No.

CR2E034 (3/96)