
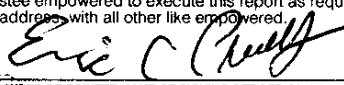


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008 8:00 am
Secretary of State

04-21-2008 90041 001 ***150.00

DOCUMENT # P98000080775 1. Entity Name ERIC PRUITT, P.A.					
Principal Place of Business XXXXXX XXXXXXXX 350 ROYAL PALM WAY, #409 PALM BEACH, FL 33480 XXXXXXXXXXXXXX			Mailing Address XXXXXX XXXXXXXX 350 ROYAL PALM WAY, #409 PALM BEACH, FL 33480 XXXXXXXXXXXXXX		
2. Principal Place of Business - No P.O. Box # c/o Kent Huffman, Esq.		3. Mailing Address c/o Kent Huffman, Esq.			
Suite, Apt. #, etc. 515 N. Flagler Dr., #801		Suite, Apt. #, etc. 515 N. Flagler Dr., #801			
City & State West Palm Beach, FL		City & State West Palm Beach, FL			
Zip 33401		Country USA		4. FEI Number 65-0863340	
33401		USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HUFFMAN, KENT ESQ 350 ROYAL PALM WAY, #409 PALM BEACH, FL 33480			7. Name and Address of New Registered Agent Kent Huffman, Esq. Street Address (P.O. Box Number is Not Acceptable) 515 North Flagler Drive Suite 801 City West Palm Beach, FL Zip Code 33401		
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. <div style="display: flex; justify-content: space-between;"> <div>SIGNATURE: Kent Huffman, Esquire</div> <div>DATE: January 28, 2008</div> </div> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE PRUITT, ERIC <input checked="" type="checkbox"/> Delete STREET ADDRESS C/O HUFFMAN 350 ROYAL PALM WAY, #409 CITY-ST-ZIP PALM BEACH, FL 33480			TITLE PSO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME ERIC PRUITT STREET ADDRESS C/O HUFFMAN, 515 N. FLAGLER DR. #801 CITY-ST-ZIP WEST PALM BEACH, FL 33401		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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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.					
SIGNATURE:  4/14/08 561-775-7333 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					