2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000040216

Entity Name: MORPUR HOLDINGS, INC.

FILED Apr 28, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1786 S.W. BILTMORE STREET 14920 ORANGE AVE PORT ST. LUCIE, FL 34984 FT. PIERCE, FL 34945

Current Mailing Address: New Mailing Address:

 1786 S.W. BILTMORE STREET
 P.O. BOX 13448

 PORT ST. LUCIE, FL 34984
 FT. PIERCE, FL 34979

FEI Number: 65-0921136 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MOORE, GAYLE
1786 S.W. BILTMORE ST
PORT ST LUCIE, FL 34984 US

MOORE, GAYLE
14920 ORANGE AVE.
FT. PIERCE, FL 34945 US

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: 04/28/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: PURVIS, JOHN S Name: PURVIS, JOHN S

 Name:
 PURVIS, JOHN S
 Name:
 PURVIS, JOHN S

 Address:
 1786 S.W. BILTMORE STREET
 Address:
 14920 ORANGE AVE

 City-St-Zip:
 PORT ST. LUCIE, FL 34984
 City-St-Zip:
 FT. PIERCE, FL 34945

Title: D () Delete Title: D (X) Change () Addition

 Name:
 MOORE, GAYLE L
 Name:
 MOORE, GAYLE L

 Address:
 1786 S.W. BILTMORE STREET
 Address:
 14920 ORANGE AVE

 City-St-Zip:
 PORT ST. LUCIE, FL 34984
 City-St-Zip:
 FT. PIERCE, FL 34945

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GAYLE MOORE D 04/28/2005