

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K42988

FILED
Apr 22, 2009
Secretary of State

Entity Name: BAD TO THE BONE, INC.

Current Principal Place of Business:

C/O ROBERT E. MOORE
14725 BOXWOOD DRIVE
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

Current Mailing Address:

C/O ROBERT E. MOORE
14725 BOXWOOD DRIVE
PALM BEACH GARDENS, FL 33418

New Mailing Address:

FEI Number: 65-0133375

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, ROBERT E.
14725 BOXWOOD DRIVE
PALM BEACH GARDENS, FL 33418 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: D () Delete
Name: MOORE, ROBERT DANE
Address: 14677 PEACE RIVER WAY
City-St-Zip: PALM BEACH GRDNS., FL 33418 US

Title: D () Delete
Name: MOORE, DAVID W.
Address: 6120 LUCERNE ST
City-St-Zip: PALM BEACH GRDNS, FL 33418 US

Title: D () Delete
Name: MOORE, ROBERT E.
Address: 14725 BOXWOOD DR
City-St-Zip: PALM BEACH GRDNS, FL 33418 US

Title: D () Delete
Name: MOORE, EVE E.
Address: 14725 BOXWOOD DR.
City-St-Zip: PALM BCH. GRDNS, FL 33418 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: ROBERT E MOORE JR.

PRES

04/22/2009

Electronic Signature of Signing Officer or Director

Date