

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # 232200 (6)

1. Corporation Name

THE BODEN CO.

Principal Place of Business

1045 48TH ST N
B
CLEARWATER FL 34622
US

Mailing Address

P O BOX 40008
ST. PETERSBURG FL 33743
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
01/15/1960

3a. Date of Last Report
05/01/1994

4. FEI Number
59-0907888

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 (1932,
Florida Statutes) ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

NEWVILLE, DUANE
6242 THIRD AVENUE S.
ST. PETERSBURG FL

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. 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, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent Signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

VD
NEWVILLE, ERIC
6242 3RD AVE S.
ST PETERSBURG, FL 00000

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PD
NEWVILLE, DUANE
6242 3RD AVE S
ST PETERSBURG, FL 00000

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

STD
NEWVILLE, MARILLYN
6242 3RD AVE S
ST PETERSBURG, FL 00000

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

VD
NEWVILLE, DENISE
6242 3RD AVE S
ST PETERSBURG FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D
NEWVILLE, WAYNE
6242 3RD AVE S.
ST PETERSBURG FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D
NEWVILLE, KURT
6242 3RD AVE S
ST PETERSBURG FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

☐ Change ☐ Addition

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

☐ Change ☐ Addition

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

☐ Change ☐ Addition

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

☐ Change ☐ Addition

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

☐ Change ☐ Addition

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

☐ Change ☐ Addition

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Marillyn Newville MARILLYN NEWVILLE

4/25/95 (813) 571-1234