

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 232200

FILED
Jan 11, 2006
Secretary of State

Entity Name: THE BODEN CO.

Current Principal Place of Business:

10445 49TH ST N
CLEARWATER, FL 33762 US

New Principal Place of Business:

Current Mailing Address:

10445 49TH STREET NORTH
CLEARWATER, FL 33762 US

New Mailing Address:

FEI Number: 59-0907988

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWVILLE, DUANE H PRES
2823 HERON PLACE
CLEARWATER, FL 34622 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: VD () Delete
Name: NEWVILLE, ERIC A
Address: 2823 HERON PLACE
City-St-Zip: CLEARWATER, FL 33762 US

Title: PD () Delete
Name: NEWVILLE, DUANE H
Address: 2823 HERON PL
City-St-Zip: CLEARWATER, FL 33762 US

Title: TD () Delete
Name: NEWVILLE, MARILLYN A
Address: 2823 HERON PL
City-St-Zip: CLEARWATER, FL 33762 US

Title: SVD () Delete
Name: NEWVILLE, DENISE J
Address: 14248 SHEARWATER COURT
City-St-Zip: CLEARWATER, FL 33792 US

Title: D () Delete
Name: NEWVILLE, WAYNE C
Address: 2823 HERON PL
City-St-Zip: CLEARWATER, FL 33762 US

Title: D () Delete
Name: NEWVILLE, KURT E
Address: 2823 HERON PL
City-St-Zip: CLEARWATER, FL 33762 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
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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 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: DENISE J. NEWVILLE

SVD

01/11/2006

Electronic Signature of Signing Officer or Director

Date