

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 479354

FILED
Feb 27, 2005
Secretary of State

Entity Name: BO-ONE, CORPORATION

Current Principal Place of Business:

10281 SORRENTO RD.
41
PENSACOLA, FL 32507 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2057
PENSACOLA, FL 32513 US

New Mailing Address:

FEI Number: 59-1603690

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOLFE, CURTIS F.
7830 STALLWORTH LANE
PENSACOLA, FL 32526 US

Name and Address of New Registered Agent:

BOONE, ROSE B
10831 TARA DAWN CIRCLE
PENSACOLA, FL 32534 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: ROSE B. BOONE

02/27/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BOONE, RALPH E JR
Address: 17628 HWY. 180
City-St-Zip: GULF SHORES, AL 36542 US

Title: STD () Delete
Name: BOONE, SUE A
Address: 17628 HWY. 180
City-St-Zip: GULF SHORES, AL 36542 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: RALPH E. BOONE, JR.

PD

02/27/2005

Electronic Signature of Signing Officer or Director

Date