2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 530937

Entity Name: BOA, INC.

FILED Jan 07, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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D/B/A COMPUTERIZES 5084 SOUTHSHORE DRIVE POLK CITY, FL 338689560 US

Current Mailing Address: New Mailing Address:

D/B/A COMPUTERIZES
5084 SOUTHSHORE DRIVE
5084 SOUTHSHORE DRIVE
POLK CITY, FL 338689560 US
5084 SOUTHSHORE DRIVE
POLK CITY, FL 338689560 US

FEI Number: 59-1738690 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BUKOSKI, CHARLES F.
5084 SOUTHSHORE DR
POLK CITY, FL 33868 US

BUKOSKI, CHARLES F
5084 SOUTHSHORE DR
POLK CITY, FL 33868 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: CHARLES F. BUKOSKI 01/07/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition

Name: BUKOSKI, CHARLES F., Name:

 Address:
 5084 SOUTHSHORE DRIVE
 Address:

 City-St-Zip:
 POLK CITY, FL
 City-St-Zip:

Title: VP () Delete Title: () Change () Addition

 Name:
 ATEN, WILLIAM G. III,
 Name:

 Address:
 1602 SIR HENRY'S TRAIL
 Address:

 City-St-Zip:
 LAKELAND, FL
 City-St-Zip:

Title: ST () Delete Title: () Change () Addition

 Name:
 BUKOSKI, JUDITH,
 Name:

 Address:
 5084 SOUTHSHORE DR
 Address:

 City-St-Zip:
 POLK CITY, FL
 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: CHARLES F. BUKOSKI PRES 01/07/2004