

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 833345

FILED
Oct 10, 2007
Secretary of State

Entity Name: BOYLE ENGINEERING CORPORATION

Current Principal Place of Business:

1501 QUAIL STREET
NEWPORT BEACH, CA 92660

New Principal Place of Business:

Current Mailing Address:

PO BOX 7350
NEWPORT BEACH, CA 92658

New Mailing Address:

FEI Number: 95-1735889

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

D'ANGELO, SALVATORE
320 EAST SOUTH STREET
ORLANDO, FL 32801 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

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: HOLMGREN, JON S
Address: 1501 QUAIL STREET
City-St-Zip: NEWPORT BEACH, CA 92660

Title: S () Delete
Name: HUCHEL, DAVID W
Address: 1501 QUAIL STREET
City-St-Zip: NEWPORT BEACH, CA 92660

Title: VD () Delete
Name: D'ANGELO, SALVATORE
Address: 320 EAST SOUTH STREET
City-St-Zip: ORLANDO, FL 32801

Title: D () Delete
Name: WILSON, ROBERT K
Address: 30 LA NORIA
City-St-Zip: ORINDA, CA 94563

Title: PD () Delete
Name: PETROCELLI, PHILIP V
Address: 1501 QUAIL STREET
City-St-Zip: NEWPORT BEACH, CA 92660

Title: D () Delete
Name: FARLIE, CRAIG L
Address: 2500 AQUA VISTA BLVD
City-St-Zip: FORT LAUDERDALE, FL 33301

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:

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

Title: VP (X) Change () Addition
Name: VOKOUN, THOMAS C
Address: 3550 SW CORPORATE PARKWAY
City-St-Zip: PALM CITY, FL 34990

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: DAVID W. HUCHEL

S

10/10/2007

Electronic Signature of Signing Officer or Director

Date