

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 844166

FILED  
Mar 19, 2009  
Secretary of State

Entity Name: BOYLAN SALES, INC.

**Current Principal Place of Business:**

607 N MAIN ST  
PLAINWELL, MI 49080358 US

**New Principal Place of Business:**

**Current Mailing Address:**

607 N MAIN ST  
P.O.BOX 358  
PLAINWELL, MI 49080358 US

**New Mailing Address:**

FEI Number: 38-0366930      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SHIELDS, MICHAEL  
13438 MILITARY TRAIL  
DELRAY BEACH, FL 33445 US

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

SHIELDS, MICHAEL  
13438 S. MILITARY TRAIL  
DELRAY BEACH, FL 33484 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: \_\_\_\_\_

Electronic Signature of Registered Agent

03/19/2009

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DC ( ) Delete  
Name: BOYLAN, JAMES C  
Address: 3329 SUNSET KEY CIRCLE #307  
City-St-Zip: PUNTA GORDA, FL 33955

Title: D ( ) Delete  
Name: BOYLAN, SARAHANNE,  
Address: 3329 SUNSET KEY CIRCLE #307  
City-St-Zip: PUNTA GORDA, FL 33955

Title: PD (X) Delete  
Name: BOYLAN, PATRICK T  
Address: 27 TERRACE CT  
City-St-Zip: PLAINWELL, MI 49080

Title: STD (X) Delete  
Name: BOYLAN, RAELENE  
Address: 27 TERRACE CT  
City-St-Zip: PLAINWELL, MI 49080

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

Title: PT (X) Change ( ) Addition  
Name: BOYLAN, PATRICK T  
Address: 27 TERRACE CT  
City-St-Zip: PLAINWELL, MI 49080

Title: V (X) Change ( ) Addition  
Name: BOYLAN, RAELENE M  
Address: 27 TERRACE CT  
City-St-Zip: PLAINWELL, MI 49080

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 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: PATRICK T BOYLAN

Electronic Signature of Signing Officer or Director

PT

03/19/2009

Date