


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2005 8:00 am
Secretary of State

03-30-2005 90031 026 ***150.00

DOCUMENT # F00000006170																										
1. Entity Name BOYD RESORTS, INC.																										
Principal Place of Business 544 NEWTOWN ROAD SUITE 128 VIRGINIA BEACH, VA 23462			Mailing Address 544 NEWTOWN ROAD SUITE 128 VIRGINIA BEACH, VA 23462																							
2. Principal Place of Business		3. Mailing Address																								
Suite, Apt. #, etc.		Suite, Apt. #, etc.																								
City & State		City & State																								
Zip	Country	Zip	Country	03162005 Chg-P CR2E034 (10/03)																						
4. FEI Number 59-4495726 54-1495726				<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Applied For</td> </tr> <tr> <td style="padding: 2px;">Not Applicable</td> </tr> </table>		Applied For	Not Applicable																			
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Not Applicable																										
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																										
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent																							
D'ESPIES, KEVIN J 888 EAST LAS OLAS BLVD., STE 720 FORT LAUDERDALE, FL 33301			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Name</td> </tr> <tr> <td style="padding: 2px;">Street Address (P.O. Box Number is Not Acceptable)</td> </tr> <tr> <td style="padding: 2px;">City</td> </tr> <tr> <td style="padding: 2px;"> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="padding: 2px; text-align: center;">FL</td> <td style="padding: 2px;">Zip Code</td> </tr> </table> </td> </tr> </table>			Name	Street Address (P.O. Box Number is Not Acceptable)	City	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="padding: 2px; text-align: center;">FL</td> <td style="padding: 2px;">Zip Code</td> </tr> </table>	FL	Zip Code															
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8. 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. I am familiar with, and accept the obligations of registered agent.																										
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____																										
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees																								
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																							
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																										
SIGNATURE: _____ David S. Rudiger, Pres 3-23-05 757-490-1959 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																										