

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006170

Entity Name: BOYD RESORTS, INC.

FILED
Mar 05, 2009
Secretary of State

Current Principal Place of Business:

544 NEWTOWN ROAD
SUITE 128
VIRGINIA BEACH, VA 23462

New Principal Place of Business:

Current Mailing Address:

544 NEWTOWN ROAD
SUITE 128
VIRGINIA BEACH, VA 23462

New Mailing Address:

FEI Number: 54-1495726

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

D'ESPIES, KEVIN J
888 EAST LAS OLAS BLVD., STE 720
FORT LAUDERDALE, FL 33301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: BOYD, JOESPH W JR.
Address: 6501 RED HOOK PL STE 201
City-St-Zip: ST THOMAS, VI 00802

Title: VPTS () Delete
Name: MINSCHKE, FRANK B II
Address: 544 NEWTOWN ROAD SUITE 128
City-St-Zip: VIRGINIA BEACH, VA 23462

Title: P () Delete
Name: RUDIGER, DAVID S
Address: 544 NEWTOWN ROAD SUITE 128
City-St-Zip: VIRGINIA BEACH, VA 23462

Title: VP () Delete
Name: BOYD, JOSEPH W
Address: 544 NEWTOWN ROAD STE 128
City-St-Zip: VIRGINIA BEACH, VA 23462

Title: VP () Delete
Name: BOYD, JUSTIN R
Address: 544 NEWTOWN ROAD STE 128
City-St-Zip: VIRGINIA BEACH, VA 23462

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: VP (X) Change () Addition
Name: BOYD, JOSEPH W III
Address: 544 NEWTOWN ROAD STE 128
City-St-Zip: VIRGINIA BEACH, VA 23462

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: DAVID S. RUDIGER

P

03/05/2009

Electronic Signature of Signing Officer or Director

Date