2005 FOR PROFIT CORPORATION ANNUAL REPORT

Brian Call &

SIGNATURE:

FILED Mar 02, 2005 8:00 am Secretary of State

02/10/2005

DOCUMENT #.F0300001429 1. Entity Name BOON EDAM, INC.						03-02-2005 90080 021 ***150.00				
Principal Place of Business 4050 S. 500 W. SALT LAKE CITY, UT 84123			Mailing Address 4050 S. 500 W. SALT LAKE CITY, UT 84123				1 1 5 1 58 (1111 1 8 1111 1 6 1111 1 8 111		09178	
2. Principal Place of Business			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			01182005	Chg-P	CR2E0	34 (10/03)	
City & State			City & State		4. FEI Numo 87-045			 	plied For t Applicable	
Zip			Zip Coun		tr./	5. Certificate	of Status Desired		\$8.75 Addi Fee Required	
6: Name and Address of Current Registered Agent					Name	-7Name and	Address of New R	egistered /	Agent: ~~~	
TRACY, GLEN P 11438 WATERFORD VILLAGE DRIVE				Street Address (P.O. Box Number is Not Acceptable)						
FT. MYERS, FL 33913										
					City FL Zip Cox				Zip Code	;
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 Signature, typed or printed name of register id a gent and take if upplicable. (NCTE: Registered)						d when reinstating)		DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution.						.00 May Be led to Fees			17	
10.		TORS	11.		ADDITIONS	CHANGES TO OFF	ICERS AND			
TITLE NAME STREET ADDRESS CITY-ST-ZIP									☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	72				1				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BUNKALL, DAVID 4050 S. 500 W. SALT LAKE CITY, UT	84123	Delete						- Change	Addition
TITLE NAME STREET ADDRESS CITY: ST- ZIP	DVST CALL, BRIAN G 4050 S. 500 W. SANT LAKE CITY, UT	84123	☐ Delete	1					Change .	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BORTO, MARK G 5324 VELVET BENT CO NAPERVILLE, IL '6056	OURT 4	Uelete		1	*			Change	Addition
TITLE NAME STREET ADDRESS CITY ST-ZIP	Rurf J. Meas 4050 S. 500 Solf Lake C	µ ;	□ Defete		l.	. +3			Change	Addition
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 the 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 I ke empowered.										