

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004525

FILED
Apr 29, 2005
Secretary of State

Entity Name: BOYLE ENTERPRISES OF ORLANDO, INC.

Current Principal Place of Business:

12565 RESEARCH PARKWAY, SUITE 300
ORLANDO, FL 32826

New Principal Place of Business:

Current Mailing Address:

12565 RESEARCH PARKWAY, SUITE 300
ORLANDO, FL 32826

New Mailing Address:

FEI Number: 75-2462475

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOYLE, JIM
12565 RESEARCH PARKWAY, SUITE 300
ORLANDO, FL 32826 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: D () Delete
Name: BOYLE, JAMES H
Address: 320 REMINGTON DRIVE
City-St-Zip: OVIEDO, FL 32765

Title: P () Delete
Name: BOYLE, JIM
Address: 320 REMINGTON DRIVE
City-St-Zip: OVIEDO, FL 32765

Title: S () Delete
Name: RODGERS, KATHLEEN A
Address: 320 REMINGTON DRIVE
City-St-Zip: OVIEDO, FL 32765

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JIM BOYLE

P

04/29/2005

Electronic Signature of Signing Officer or Director

Date