## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996 **DOCUMENT #** 

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1. Corporation	BOYS, INC.	(1)		 	BANTI BAN AYAN BARK BURN BARK BARK BARK DARI	
Principal Place	of Business	Mailing Address				
P. O. BOX 24 P.O. BOX 24 NEW SMYRNA BCH, FL 32170-0024 US		P. O. BOX 24 P.O. BOX 24 NEW SMYRNA BEACH FL 32170-0024 US		Date Incorporated or Qualified     3a. Date of Last Report     OF MANAGED.		
2. Principal Pla	ace of Business	2a. Mailing Address		01/21/1981 4. FEI Number	05/01/1995 Applied For	
21		26		59-2061301	Not Applicable	
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27		O. Octalicate of Status Desired	Fee Required	
City & State	1	Oity & State		6. Election Campaign Financing	رتم <b>\$5.00</b> May Be	
Zip	Country	<b>28</b>	Country	Trust Fund Contribution	Added to Fees	
24	25 29		Country   8. This corporation has liability for intengible tax under s 199.032,   10   Florida Statutes   Yes   No		intangiole tax under si 199.032,	
	9. Name and Address of Curren		12.71	10. Name and Address of New F	-	
			81 Name			
FEGER, WILLIAM F., JR			82 Street Addre	82 Street Address (P.O. Box Number is Not Acceptable)		
244 NORTH CAUSEWAY				· · · · · · · · · · · · · · · · · · ·		
NEW (	SMYRNA BEACH FL 32169		83			
			84 City		85 Zip Code	
11. Pursuant to or registere familiar wit	o the provisions of Sections 607,0602 ed agent, or both, in the State of Flond h, and accept the obligations of, Secti	and 607 1508, Florida Statute la Such change was authorize on 607,0505, Florida Statutes	es, the above named corpora ed by the corporation's board	ation submits this statement for the pu d of directors. Thereby accept the app	rpose of changing its registered office pointment as registered agent. I am	
SIGNATURE						
	Signature, typind or printed har at of registered agent.		Her Birgi status Agunt signature required		DATE	
12. 111LE	OFFICERS AND	continued to the continued to the continued to	13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12	
NAME	P PEOPO WHILLIAM P ID	[]] DELETE	1.1 TIME		Change Addition	
STREET ADDRESS	FEGER, WILLIAM F JR 244 NORTH CAUSEWAY		1.2 NAME 1.3 STREET ADDRESS			
CITY- \$1- ZIP	NEW SMYRNA BCH FL		1.4 CITY - ST - ZIP			
TITLE	ST	[]] DELETE	2 1 7/116	·	Change Addition	
NAME	FEGER, EMMA MAY		2 2 NAME			
STREET ADDRESS	244 NORTH CAUSEWAY		2 3 STREET ADDRESS			
CITY-ST-ZIP	NEW SMYRNA BCH FL		2.4 C(1) Y - S1 - Z(P			
TITLE		[]] DELETE	3 1 1111 6		Change Addition	
NAME			3 2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		[] DELETE	3.4 C(TY - \$1 - 7(P)		Change D Addition	
NAME	•	C) extre it	4. 1 TIILE 4.2 NAME		Change Addition	
STREET ADDRESS			4.3 STHEET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		[]] DELETE	5. 1 TITLE		Change Addition	
NAME			5.2 NAME		· <u>-</u>	
STREET ADDRESS			5.3 STREET ADORESS			
CITY-S1-ZIP			5.4 CITY - S1 - ZIP			
TITLE		DELETE	6. 1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY - ST - ZIP	y certify that the information supplied v		6 4 CITY - S1 - 7IP			

SIGNATURE:

certify that the information indicated on this annual reserved or supplemental annual reserved 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 Brock 12 or Block 13 if changed, or on an attachment with an address.

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