

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004057

FILED  
Apr 29, 2008  
Secretary of State

Entity Name: BOYKIN MIAMI II, INC.

## Current Principal Place of Business:

45 W. PROSPECT AVENUE  
SUITE 1500  
CLEVELAND, OH 44115

## New Principal Place of Business:

8015 W KENTON CIRCLE  
SUITE 220  
HUNTERSVILLE, NC 28078

## Current Mailing Address:

45 W. PROSPECT AVENUE  
SUITE 1500  
CLEVELAND, OH 44115

## New Mailing Address:

8015 W KENTON CIRCLE  
SUITE 220  
HUNTERSVILLE, NC 28078

FEI Number: 34-1920361

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: PD ( ) Delete  
Name: BOYKIN, ROBERT W  
Address: 45 W. PROSPECT, SUITE 1500  
City-St-Zip: CLEVELAND, OH 44115

Title: V ( ) Delete  
Name: BOYKIN, JOHN E  
Address: 45 W. PROSPECT, SUITE 1500  
City-St-Zip: CLEVELAND, OH 44115

Title: ST (X) Delete  
Name: SMITH, JOSEPH F  
Address: 45 W. PROSPECT, SUITE 1500  
City-St-Zip: CLEVELAND, OH 44115

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: BOYKIN, ROBERT W  
Address: 8015 W KENTON CIRCLE, SUITE 220  
City-St-Zip: HUNTERSVILLE, NC 28078

Title: V (X) Change ( ) Addition  
Name: BOYKIN, JOHN E  
Address: 8015 W KENTON CIRCLE, SUITE 220  
City-St-Zip: HUNTERSVILLE, NC 28078

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: ROBERT W BOYKIN

PD

04/29/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date