

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 16, 2004 8:00 am
Secretary of State

03-16-2004 90068 001 ***300.00

DOCUMENT # H17976

1. Entity Name
BORU, INC.



Principal Place of Business

**1111 N. CONGRESS AVENUE
W. PALM BEACH, FL 33409**

Mailing Address

**1111 N. CONGRESS AVENUE
W. PALM BEACH, FL 33409**



03012004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-1318711

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**LAUGHLIN, ARTHUR J.
PALM BEACH KENNEL CLUB
1111 NO. CONGRESS AVENUE
W PALM BEACH, FL**

**DO NOT WRITE
IN THIS SPACE**

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 registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ROONEY, TIMOTHY J.
STREET ADDRESS	160 WELL RD
CITY-ST-ZIP	PALM BEACH, FL
TITLE	VD
NAME	ROONEY, PATRICK J.
STREET ADDRESS	1111 NORTH CONGRESS AVENUE
CITY-ST-ZIP	WEST PALM BEACH, FL 33409
TITLE	STD
NAME	ROONEY, JOHN J.
STREET ADDRESS	2929 MARYS WAY
CITY-ST-ZIP	WEST PALM BEACH, FL 33410
TITLE	D
NAME	ROONEY, DANIEL M.
STREET ADDRESS	940 NORTH LINCOLN
CITY-ST-ZIP	PITTSBURG, PA
TITLE	D
NAME	ROONEY, ARTHUR J., JR.
STREET ADDRESS	1190 WASHINGTON RD
CITY-ST-ZIP	PITTSBURGH, PA
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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 this 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 like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Arthur J. Laughlin

3/1/04 561-683-2222