

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K39080

FILED  
Apr 25, 2008  
Secretary of State

Entity Name: BOCA GRANDE LIMOUSINE, INC.

**Current Principal Place of Business:**

446 - 4TH ST.  
BOCA GRANDE, FL 33921 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 413  
BOCA GRANDE, FL 33921

**New Mailing Address:**

FEI Number: 65-0089922

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CHRISTENSEN, GARY W  
446 4TH STREET  
BOCA GRANDE, FL 33921 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: P ( ) Delete  
Name: CHRISTENSEN, GARY W  
Address: 446 4TH STREET  
City-St-Zip: BOCA GRANDE, FL 33921

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: CHRISTENSEN, DEVAN  
Address: PO BOX 2322  
City-St-Zip: BOCA GRANDE, FL 33921

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: GARY CHRISTENSEN

P

04/25/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date