

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K56130

FILED
Mar 30, 2008
Secretary of State

Entity Name: BOLDER ENTERPRISES, INC.

Current Principal Place of Business:

2609 TREEHAVEN DR.
DELTONA, FL 32738 US

New Principal Place of Business:

Current Mailing Address:

2609 TREEHAVEN DR.
DELTONA, FL 32738 US

New Mailing Address:

FEI Number: 65-0093036

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, J. R
20 OLD POST ROAD
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

BROWN, J R
2609 TREEHAVEN DR
DELTONA, FL 32738 US

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: J R BROWN

03/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BROWN, J. ROBERT,
Address: 2609 TREEHAVEN DR.
City-St-Zip: DELTONA, FL 32738

Title: DS () Delete
Name: BROWN, MARTHA L
Address: 2609 TREEHAVEN DR.
City-St-Zip: DELTONA, FL 32738

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BROWN, J R
Address: 2609 TREEHAVEN DR.
City-St-Zip: DELTONA, FL 32738

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: J R BROWN

DP

03/30/2008

Electronic Signature of Signing Officer or Director

Date