

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L11052

FILED
Apr 28, 2008
Secretary of State

Entity Name: BOOLE DEVELOPMENT GROUP, INC.

Current Principal Place of Business:

28360 OLD US 41
6
BONITA SPRINGS, FL 34135 US

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 2568
BONITA SPRINGS, FL 34133 US

New Mailing Address:

FEI Number: 65-0178367 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOOLE, DARREN J
28360 OLD US 41 ROAD
SUITE 6
BONITA SPRINGS, FL 34135 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: BOOLE, DARREN J
Address: 605 CORBEL DRIVE
City-St-Zip: NAPLES, FL 34110

Title: VPS () Delete
Name: BOOLE, TINA S
Address: 605 CORBEL DR
City-St-Zip: NAPLES, FL 34110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BOOLE, DARREN J
Address: P.O.BOX 2568
City-St-Zip: BONITA SPRINGS, FL 34133

Title: VPS (X) Change () Addition
Name: BOOLE, TINA S
Address: P.O.BOX 2568
City-St-Zip: BONITA SPRINGS, FL 34133

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: DARREN BOOLE

PRES

04/28/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date