

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L14310

FILED
Jan 02, 2007
Secretary of State

Entity Name: THE BOY'S FARMERS MARKET, INC.

Current Principal Place of Business:

14378 MILITARY TRAIL
DELRAY BEACH, FL 334842626

New Principal Place of Business:

Current Mailing Address:

14378 MILITARY TRAIL
DELRAY BEACH, FL 334842626

New Mailing Address:

FEI Number: 65-0159043

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHILLINGER, LEE H
4601 SHERIDAN STREET, SUITE 202
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

HODKIN, ADAM J
350 E. LAS OLAS BLVD.
980
FT. LAUDERDALE, FL 33301 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: ADAM HODKIN

01/02/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: PALERMO, LINDA
Address: 14378 MILITARY TRAIL
City-St-Zip: DELRAY BEACH, FL 334842626

Title: CEO () Delete
Name: PALERMO, JOSEPH II
Address: 14378 MILITARY TRAIL
City-St-Zip: DELRAY BEACH, FL 334842626

Title: VPO () Delete
Name: PALERMO, JOSEPH III
Address: 14378 MILITARY TRAIL
City-St-Zip: DELRAY BEACH, FL 334842626

Title: T () Delete
Name: PALERMO, ANDREA
Address: 14378 MILITARY TRAIL
City-St-Zip: DELRAY BEACH, FL 334842626

Title: S () Delete
Name: PALERMO, MICHAEL
Address: 14378 MILITARY TRAIL
City-St-Zip: DELRAY BEACH, FL 334842626

Title: VPD () Delete
Name: PALERMO, FRANK
Address: 14378 MILITARY TRAIL
City-St-Zip: DELRAY BEACH, FL 334842626

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: LINDA PALERMO

P/D

01/02/2007

Electronic Signature of Signing Officer or Director

Date