

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L18085

FILED  
Mar 28, 2007  
Secretary of State

Entity Name: BOYNTON BILLIARDS, INC.

## Current Principal Place of Business:

1950 S FEDERAL HWY  
BOYNTON BEACH, FL 33435 US

## New Principal Place of Business:

## Current Mailing Address:

1950 S FERERAL HWY  
BOYNTON BCH, FL 33435 US

## New Mailing Address:

FEI Number: 65-0188689      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORVEY, DEBORAH, J  
4875 BUCIDA RD.  
BOYNTON BCH, FL 33436 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: PD ( ) Delete  
Name: CORVEY, JOHN,  
Address: 4875 BUCIDA RD.  
City-St-Zip: BOYNTON BCH, FL 33436

Title: VSD (X) Delete  
Name: CORVEY, DEBORAH,  
Address: 4875 BUCIDA RD.  
City-St-Zip: BOYNTON BCH, FL 33436

Title: VPD ( ) Delete  
Name: WOOD, LARRY JR.  
Address: 9570 ALOE RD.  
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VPD ( ) Delete  
Name: CORVEY, JOHN JR.  
Address: 1950 CORNEY JR.  
City-St-Zip: BOYNTON BEACH, FL 33435

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: CORVEY, DEBORAH,  
Address: 4875 BUCIDA RD.  
City-St-Zip: BOYNTON BCH, FL 33436

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

Title: VPSD (X) Change ( ) Addition  
Name: WOOD, LARRY JR.  
Address: 9570 ALOE RD.  
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VPD (X) Change ( ) Addition  
Name: CORVEY, JOHN JR.  
Address: 1950 S. FEDERAL HWY  
City-St-Zip: BOYNTON BEACH, FL 33435

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: DEBORAH J. CORVEY

P

03/28/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date