

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L27853

FILED
Jan 05, 2005
Secretary of State

Entity Name: BOYLE & ASSOCIATES, INC.

Current Principal Place of Business:

% FRANK W. BOYLE
962 N BENEVA RD
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

% FRANK W. BOYLE
962 N BENEVA RD
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 59-2976602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOYLE, FRANK W.
962 N BENEVA RD
SARASOTA, FL 34232 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: D () Delete
Name: BOYLE, FRANK W.,
Address: 962 N BENEVA RD
City-St-Zip: SARASOTA, FL

Title: D () Delete
Name: BOYLE, EILEEN,
Address: 962 N BENEVA RD
City-St-Zip: SARASOTA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BOYLE, FRANK W.,
Address: 962 N BENEVA RD
City-St-Zip: SARASOTA, FL 34232 US

Title: D (X) Change () Addition
Name: BOYLE, EILEEN,
Address: 962 N BENEVA RD
City-St-Zip: SARASOTA, FL 34232 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: FRANK W. BOYLE

PRES

01/05/2005

Electronic Signature of Signing Officer or Director

Date