

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003985

FILED  
Feb 20, 2008  
Secretary of State

Entity Name: THE TASTE OF BOCA RATON, INC.

## Current Principal Place of Business:

THE WAYNE BARTON STUDY CENTER  
269 NE 14TH STREET  
BOCA RATON, FL 33432

## New Principal Place of Business:

## Current Mailing Address:

THE WAYNE BARTON STUDY CENTER  
269 NE 14TH STREET  
BOCA RATON, FL 33432

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BARTON, WAYNE  
269 NE 14TH STREET  
BOCA RATON, FL 33432 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

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: BARTON, WAYNE  
Address: 269 NE 14TH STREET  
City-St-Zip: BOCA RATON, FL 33432

Title: D ( ) Delete  
Name: BEARDEN, JAMES  
Address: 2851 S. OCEAN BLVD.  
City-St-Zip: BOCA RATON, FL 33432

Title: D ( ) Delete  
Name: OXENDINE, HAZEL  
Address: 940 SWEETWATER LANE  
City-St-Zip: BOCA RATON, FL 33431

Title: D ( ) Delete  
Name: BENES, EDGAR  
Address: 17554 WAGON WHEEL DRIVE  
City-St-Zip: BOCA RATON, FL 33432

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: BEARDEN, JAMES  
Address: 4201 N. OCEAN BLVD. #303C  
City-St-Zip: BOCA RATON, FL 33431

Title: D (X) Change ( ) Addition  
Name: OXENDINE, HAZEL  
Address: 101 PLAZA REAL S  
City-St-Zip: BOCA RATON, FL 33432

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WAYNE BARTON

CEO

02/20/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date