## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000010349

FILED Apr 11, 2007 Secretary of State

Entity Name: BOYETTE PROFESSIONAL PARK OWNERS ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	YETTE RD W, FL 33569			
Current Mailing Address:		New Mailing Address:		
	YETTE RD W, FL 33569			
FEI Number	: 20-5235513	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired (X)
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:		
10931 BOʻ				
The above in the State	W, FL 33569 named entity se of Florida.	US submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
The above in the State	W, FL 33569 named entity s e of Florida. RE:	submits this statement for the p		ed office or registered agent, or both,
The above in the State SIGNATUI	W, FL 33569 named entity s e of Florida. RE:	submits this statement for the particles of Registered Agric Signature of Registered Agr	ent	
The above in the State SIGNATUI  OFFICER: Title: Name: Address:	w, FL 33569 named entity se of Florida.  RE: Electron S AND DIREC	submits this statement for the particle Signature of Registered Agrant TORS:  Delete DEERTHJR TERD	ent	Date
The above in the State SIGNATUI	W, FL 33569 e named entity se of Florida.  RE:  Electron S AND DIREC  PTD () ENCINOSA, RC 10931 BOYETT RIVERVIEW, FI	submits this statement for the partic Signature of Registered Agroup TORS:  Delete DEERT H JR TE RD Delete DEERYL L TE RD	ent  ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

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

SIGNATURE: ROBERT H ENCINOSA JR PTD 04/11/2007