Seud ck # 424 Norch 19-2007

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 08, 2008 08:00 Al Secretary of State

102-10-2008

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DOCH	MENT # N26943			•	Secretary of S
1. Entity Nam	ne				-
THE BOV	VMAN FOUNDATION, INC.				
Principal Plac	e of Business	Mailing Address		,	
4475 MERID		4475 MERIDIAN AVENUE			
	H, FL 33140 US		JS		
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	was a large of your for the state	Company of Same		04000000 N- Ch- ND	CD0E007 (4/0c)
	O NOT WRITE	IN THIS SOA	CE A M	01082008 No Chg-NP	CR2E037 (4/06)
- 1 1 L	ONOTANKITE	IN THIS STA	UE.	4. FEI Number	Applied For
	可以是一种的 计数据 医多种性 医二种种			65-0084409	Not Applicable
				5. Certificate of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current Re	gistered Agent	TE STORY OF STREET) 19 5 1479 (2116) (3 1 1 1 1 1 1 1 1 1	Charles San State of the Control of
	, ROSE HELEN IDIAN AVE.			DO NOT W	RITE
	ACH, FL 33140			"我可能的,我也可能是我一点,我 可能 找了一个一个一个。"	的复数货币 医皮肤外外性静脉体 高雄 网络毛属绿色属 在这样
				IN THIS SF	'ACE
8 The shows	named entity submits this statement for the	ne purpose of changing its register	od office or register	中心的 was a both in the State of El	Carlotte Lors formilles with and annual
the obligat	lions of registered agent:-	io porposo of untariging as register	ad office or register	od again, or both, in the otate of th	orida. Tam familiai willi, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and	title if applicable (NOTE, Registere	d Agent signature required	when reinstating)	DATE
	Filing Fee is \$61.25 Due by May 1, 2008	Election Campaign Final Trust Fund Contribution.		00 May Be ed to Fees	
10.	OFFICERS AND DI	RECTORS	国际发展。	Marie Control of the	
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NAME CTREET ADDRESS			■"母严"芸 满 鸡腹。	and the little to the Grant of the second of the	化二氯磺基丁二烷基酚二氢羟基金基乙基苯二苯甲
	WARLEN, GARY M	1			nngoniac
STREET ADDRESS CITY-ST-ZIP	5220 S. UNIVERSITY DR.,STE. 21	1			00820485 8-80030-029-61-25
		1			00820485. 8-80030+029,61,25
CITY-ST-ZIP	5220 S. UNIVERSITY DR.,STE. 21 DAVIE, FL 33328	1			
CITY-ST-ZIP TITLE NAME STREET ADDRESS	5220 S. UNIVERSITY DR.,STE. 21 DAVIE, FL 33328 VD EEFTING, ILENE 735 NE 91 ST STREET APT 3	1			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5220 S. UNIVERSITY DR.,STE. 21 DAVIE, FL 33328 VD EEFTING, ILENE 735 NE 91 ST STREET APT 3 MIAMI SHORES, FL 33138	1			
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	5220 S. UNIVERSITY DR.,STE. 21 DAVIE, FL 33328 VD EEFTING, ILENE 735 NE 91 ST STREET APT 3 MIAMI SHORES, FL 33138 PTD	1			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5220 S. UNIVERSITY DR.,STE. 21 DAVIE, FL 33328 VD EEFTING, ILENE 735 NE 91 ST STREET APT 3 MIAMI SHORES, FL 33138 PTD BOWMAN, ROSE HELEN	1		02/18/0	8-80030+023; 61-25
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. hereby indicated	5220 S. UNIVERSITY DR.,STE. 21 DAVIE, FL 33328 VD EEFTING, ILENE 735 NE 91 ST STREET APT 3 MIAMI SHORES, FL 33138 PTD BOWMAN, ROSE HELEN 4475 MERIDIAN AVE	is filing does not qualify for the exue and accurate and that my signs	iture shall have the :	DO NOT V IN THIS S In Chapter 119, Florida Statutes, same legal effect as if made under	VRITE PACE Jurther certify that the information oath; that I am an officer or director

HELESOPHIAN OF ESCULATE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR