2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000089354

Entity Name: BOCA FINANCE CORPORATION

FILED May 03, 2007 Secretary of State

05/03/2007

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

601 S. FEDERAL HWY. 601 S. FEDERAL HWY. STE 150 STE 301

BOCA RATON, FL 33432 BOCA RATON, FL 33432

Current Mailing Address: New Mailing Address:

601 S. FEDERAL HWY.

STE 150

BOCA RATON, FL 33432

601 S. FEDERAL HWY.

STE 301

BOCA RATON, FL 33432

BOCA RATON, FL 33432

FEI Number: 65-1054058 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

POWERS, SEAN

1527 S.W. 1ST AVE

BOCA RATON, FL 33432 US

GREEN, SANDRA

601 S. FEDERAL HWY

STE 301

BOCA RATON, FL 33432 US

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: SANDRA GREEN

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TSD () Delete Title: () Change () Addition

 Name:
 POWERS, SEAN
 Name:

 Address:
 1527 S.W. 1ST AVE
 Address:

 City-St-Zip:
 BOCA RATON, FL 33432
 City-St-Zip:

Title: PD () Delete Title: () Change () Addition

 Name:
 GREEN, SANDRA
 Name:

 Address:
 2848 NE 32ND ST.
 Address:

 City-St-Zip:
 LIGHTHOUSE, FL 33064
 City-St-Zip:

Title: VD (X) Delete Title: () Change () Addition

 Name:
 TRONCONE, ANNA-DEA
 Name:

 Address:
 4817 SPRINGTREE DR.
 Address:

 City-St-Zip:
 ARLINGTON, TN 38002
 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SEAN POWERS TSD 05/03/2007