## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 27, 2006 08:00 AM Secretary of State

ANNOAL REPORT				Carrata af C4-4-	
1. Entity Nam	MENT # P0100000031 s' BOYS CLUB, INC.	15		Secretary of State	
Principal Plac 5191 INAGU NAPLES, FL	ia way 34119	Mailing Address 2300 YORK ROAD SUITE 210 TIMONIUM, MD 21093			EKER JIEM SEJAN SEKIJ SEMIJ EKNI ARAN SEJAN SEJER ANSJ ATEJ DAJEKI IT MEG
DO NOT WRITE IN THIS SPACE				D3D12DD6 No Chg-P CR2E034 (11/05)  4. FE( Number   Applied For 52-1738122   Not Applicab  5. Certificate of Status Desired   \$8.75 Additional Fee Required	
150 S PIN PLANTAT	6. Name and Address of Current Regil AN, RICHARD M ESQ E ISLAND RD, SUITE 130 ION, FL 33324 Intermed entity submits this statement for the		DO NOT WRITE IN THIS SPACE  ad office or registered agent, or both, in the State of Florida. I am familiar with, and accept		
the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and site if applicable (NOTE Registered Agent signature required when reinstating)  OATE					·
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		Trust Fund Contribution.		00 May Be ed to Fees	
10.  IITLE  NAME  STREET ADDRESS  CSTY-ST-ZIP  TITLE  NAME  STREET ADDRESS	OFFICERS AND DIRE  CP JONES, RICK A 2300 YORK ROAD, #210 TIMONIUM, MD 21093	CTORS .			000000481072 04/11/06-80018-002 150.60
CITY-ST-ZIP  TITLE  NAME  STRLET ADDRESS  CITY-ST-ZIP		•		DO I	NOT WRITE
TITLE NAME STREET ADDRESS CHY-ST-ZIP				IN T	HIS SPACE
TITLE NAME STREET ADDRESS CHTY-ST-ZIP					

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 truttee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS

NATURE AND TYPED OR PRINTED NAME OF SIGNING DEFICER OR ORSECTOR

RECK A. JONES 3/20/06
Date

239.556. 7961

Daytima Phona #