2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# P02000058179

Entity Name: BOGUE ISLAND PROPERTIES, INC.

Current Principal Place of Business:

1205 15TH AVE NORTH
SUITE B
LAKE WORTH, FL 33460

New Principal Place of Business:

6897 BAYSHORE DRIVE
SUITE B
LAKE WORTH, FL 33462 US

Current Mailing Address:

PO BOX 5358
LAKE WORTH, FL 334665358

New Mailing Address:

FEI Number: 47-0867982 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOGUE ASSOCIATES
6897 BAYSHORE DRIVE STE 8
LAKE WORTH, FL 33462 US

Name and Address of New Registered Agent:

BOGUE ASSOCIATES
6897 BAYSHORE DRIVE
SUITE B
LAKE WORTH, FL 33462 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: 04/28/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PST ( ) Delete
Name: BOGUES, ANDREE
Address: PO BOX 5358
City-St-Zip: LAKE WORTH, FL 33466

Title: VD ( ) Delete
Name: PORTER, DAVID J
Address: PO BOX 5358
City-St-Zip: LAKE WORTH, FL 334665358

Title: CD ( ) Delete
Name: BOGUES, ANDREE
Address: P.O. BOX 5358
City-St-Zip: LAKE WORTH, FL 33466

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DC (X) Change ( ) Addition
Name: BOGUES, ANDREE
Address: P.O. BOX 5358
City-St-Zip: LAKE WORTH, FL 33466

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: A. BOGUES T 04/28/2009
Electronic Signature of Signing Officer or Director — Date