2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000055515

Entity Name: BOGNOR REGIS. INC

FILED Apr 18, 2005 Secretary of State

	mer boortor	(TCE 010, 11 VO.			
Current P	rincipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
601 RIVEF	RSIDE AVENU OR	E			
JACKSON	IVILLE, FL 32:	204			
Current IV	lailing Addre	ss:	New Mailing Addres	New Mailing Address:	
12TH FLO	RSIDE AVENU OR IVILLE, FL 32:				
FEI Number	: 73-1670951	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
601 RÍVEF	EGORY S RSIDE AVENU IVILLE, FL 32:				
	e named entity e of Florida.	submits this statement for the	purpose of changing its register	ed office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PTD (FOLEY, WILLI 3500 SUNNYS JACKSONVILL	IDE DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD (FOLEY, CARO 3500 SUNNYS JACKSONVILL	IDE DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM P. FOLEY, II PTD 04/18/2005