

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000094244

Entity Name: BORO INC.

FILED
Mar 23, 2009
Secretary of State

Current Principal Place of Business:

8466 N. LOCKWOOD RIDGE ROAD
SUITE 201
SARASOTA, FL 34243

New Principal Place of Business:

Current Mailing Address:

8466 N. LOCKWOOD RIDGE ROAD
SUITE 201
SARASOTA, FL 34243

New Mailing Address:

FEI Number: 80-0074952

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIES, KATHRYN M
8232 CYPRESS LAKE DRIVE
SARASOTA, FL 34243 US

Name and Address of New Registered Agent:

DAVIES, KATHRYN M MRS
8232 CYPRESS LAKE DRIVE
SARASOTA, FL 34243 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: KATHRYN M DAVIES

03/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DAVIES, KATHRYN M
Address: 8466 N. LOCKWOOD RIDGE ROAD, SUITE 201
City-St-Zip: SARASOTA, FL 34243

Title: V () Delete
Name: DAVIES, GEMMA
Address: 8466 N. LOCKWOOD RIDGE ROAD, SUITE 201
City-St-Zip: SARASOTA, FL 34243

Title: C (X) Delete
Name: DAVIES, RALPH
Address: 8466 N. LOCKWOOD RIDGE ROAD, SUITE 201
City-St-Zip: SARASOTA, FL 34243

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DAVIES, KATHRYN M MRS
Address: 8466 N. LOCKWOOD RIDGE ROAD, SUITE 201
City-St-Zip: SARASOTA, FL 34243

Title: C (X) Change () Addition
Name: DAVIES, RALPH MR
Address: 8466 N. LOCKWOOD RIDGE ROAD, SUITE 201
City-St-Zip: SARASOTA, FL 34243

Title: () Change () Addition
Name:
Address:
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: RALPH DAVIES

C

03/23/2009

Electronic Signature of Signing Officer or Director

Date