2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P03000132930

1. Entity Name

RODERICK L. BOYLE MARBLE & STONE, INC.



FILED Mar 29, 2007 08:00 A Secretary of State

Principal Place of Business

MO COUNTY DOAD FOR

8749 COUNTY ROAD 561 CLERMONT, FL 34711 Mailing Address

8749 COUNTY ROAD 561 CLERMONT, FL 34711



01052007

No Chg-P

CR2E034 (11/05)

4. FEI Number 56-2411496 Applied For Not Applicable

5. Certificate of Status Desired

Æ

\$8.75 Additional Fee Required

		· · · · · · · · · · · · · · · · · · ·					
6.	Name	and Addres	s of Cum	ent Registered Agent			

BOYLE, RODERICK L 8749 COUNTY ROAD 561 CLERMONT, FL 34711

STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

CLLINIO	M, 12 07/11		IN THIS SPACE		
8. The above the obligat	named entity submits this statement for the putions of registered agent.	rpose of changing its registere	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title if	applicable. (NOTE: Registered	J Agent signature	e required when reinstating)	DATE
FiL After M	E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. 55.00 May Be Added to Fees		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECT	TORS	I		<u> </u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BOYLE, RODERICK L 8749 COUNTY ROAD 561 CLERMONT, FL 34711				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000683355 04/05/07-80041-005 158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE					

12. I hereby certify that the information supplied with this filing 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 trustee empowered 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: RODERKK L. Boyce Roderik

2. Boyle

3-27-07

352-396-9209

Daytime Phone #