
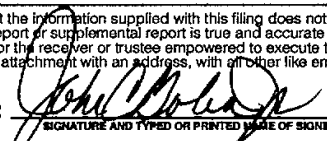


Apr 25
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**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P03000136567		
1. Entity Name JOHN BOLEN INC		
Principal Place of Business 15531 OLD CHENEY HIGHWAY ORLANDO, FL 32828		Mailing Address 15531 OLD CHENEY HIGHWAY ORLANDO, FL 32828
DO NOT WRITE IN THIS SPACE		
		01272005 No Chg-P CR2E034 (10/03)
4. FEI Number 20-0408573		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		
BOLEN, JOHN C JR 15531 OLD CHENEY HIGHWAY ORLANDO, FL 32828		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BOLEN, JOHN C JR 15531 OLD CHENEY HIGHWAY ORLANDO, FL 32828	DO NOT WRITE IN THIS SPACE
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 another like empowered.		
SIGNATURE: 		407-509-5456
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>