


2006 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Feb 17, 2006 8:00 am
Secretary of State

01-19-2006 90083 040 ***150.00

DOCUMENT # P04000059092 1. Entity Name BOYD'S HAUL & SERVICE, INC.	
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Principal Place of Business 1116 LEBRUN DR JACKSONVILLE, FL 32205	Mailing Address 1116 LEBRUN DR JACKSONVILLE, FL 32205
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66001665



01122008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0932927	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BOYD, EDWARD F 1116 LEBRUN DR JACKSONVILLE, FL 32205


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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 reinstating)</small>	DATE 1-12-06

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BOYD, EDWARD 1116 LEBRUN DR JACKSONVILLE, FL 32205
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**DO NOT WRITE
IN THIS SPACE**

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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	DATE 2-14-06 <small>Date</small>



ATTACHMENT

6001665

FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 25, 2006

BOYD'S HAUL & SERVICE, INC.
1116 LEBRUN DR
JACKSONVILLE, FL 32205

Subject: **BOYD'S HAUL & SERVICE, INC.**

Reference Number: **P04000059092**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

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ANNUAL REPORTS SECTION