

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 20, 2006 8:00 am
Secretary of State

05-03-2006 90221 031 ***150.00

DOCUMENT # P05000003083																													
1. Entity Name B. BOYLE ENTERPRISES, INC.																													
Principal Place of Business 555 W GRANADA BLVD STE E-6 ORMOND BCH, FL 32174			Mailing Address 555 W GRANADA BLVD STE E-6 ORMOND BCH, FL 32174																										
2. Principal Place of Business			3. Mailing Address 212 American Way																										
Suite, Apt. #, etc.			Suite, Apt. #, etc.																										
City & State			City & State Daytona Beach, FL																										
Zip		Country		Zip 32119																									
Country		03312006 Chg-P CR2E034 (11/05)																											
4. FEI Number 76-0781293				Applied For ☐ Not Applicable																									
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent																										
BOYLE, BRUCE S 555 W GRANADA BLVD STE E-6 ORMOND BCH, FL 32174			Name Street Address (P.O. Box Number is Not Acceptable) 212 American Way City Daytona Beach FL Zip Code 32119																										
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: <i>Bruce S. Boyle</i>			DATE: <i>5-1-06</i>																										
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																										
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																										
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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.																													
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