

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000026323

Entity Name: ACME BOYNTON PROPERTIES, INC.

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

8543 W. BOYNTON BEACH BLVD., STE. 201
BOYNTON BEACH, FL 33437

New Principal Place of Business:

8543 W. BOYNTON BEACH BLVD.,
BOYNTON BEACH, FL 33437

Current Mailing Address:

POB 480184
DELRAY BEACH, FL 33448

New Mailing Address:

FEI Number: 20-4541424

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OWENS, DAVID
8543 W. BOYNTON BEACH BLVD., STE. 201
BOYNTON BEACH, FL 33437 US

Name and Address of New Registered Agent:

OWENS, DAVID
8543 W. BOYNTON BEACH BLVD.,
BOYNTON BEACH, FL 33437 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:

04/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: OWENS, DAVID
Address: 8543 W. BOYNTON BEACH BLVD., STE. 201
City-St-Zip: BOYNTON BEACH, FL 33437

Title: ST () Delete
Name: OWENS, DAVID
Address: 8543 W BOYNTON BCH BLVD STE 201
City-St-Zip: BOYNTON BEACH, FL 33437

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: OWENS, DAVID
Address: 8543 W. BOYNTON BEACH BLVD.,
City-St-Zip: BOYNTON BEACH, FL 33437

Title: ST (X) Change () Addition
Name: OWENS, DAVID
Address: 8543 W BOYNTON BCH BLVD
City-St-Zip: BOYNTON BEACH, FL 33437

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: DAVID L. OWENS

P

04/27/2007

Electronic Signature of Signing Officer or Director

Date