2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2008
Secretary of State

DOCUMENT# P05000068617

Entity Name: BOYETTE FAMILY ENTERPRISES, INC.

Current Principal Place of Business:

1450 OCEAN REEF ROAD
WESLEY CHAPEL, FL 33543

New Principal Place of Business:

10920 CROSS CREEK BLVD
TAMPA, FL 33647

Current Mailing Address:

1450 OCEAN REEF ROAD
WESLEY CHAPEL, FL 33543

New Mailing Address:

FEI Number: 75-3191161 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOYETTE, LES W
1450 OCEAN REEF ROAD
WESLEY CHAPEL, FL 33543 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: BOYETTE, DALE
Address: 1450 OCEAN REEF ROAD
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: DPST ( ) Delete
Name: BOYETTE, LES W
Address: 1450 OCEAN REEF ROAD
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: V ( ) Delete
Name: BOYETTE, JODI
Address: 1450 OCEAN REEF ROAD
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: V ( ) Delete
Name: BOYETTE, MARY
Address: 1450 OCEAN REEF ROAD
City-St-Zip: WESLEY CHAPEL, FL 33543

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: LES BOYETTE DPST 01/29/2008

Electronic Signature of Signing Officer or Director — Date