

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000150898

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Entity Name:** BOMAC ENTERPRISES OF CAPE CORAL, INC.

**Current Principal Place of Business:**

1318 SANTA BARBARA BLVD.  
CAPE CORAL, FL 33991 US

**New Principal Place of Business:**

**Current Mailing Address:**

94-1036 WAIPIO UKA ST  
110  
WAIPAHU, HI 96797 US

**New Mailing Address:**

**FEI Number:** 45-3867042      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RIGDON, TERRI V  
1318 SANTA BARBARA BLVD.  
CAPE CORAL, FL 33991 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

**OFFICERS AND DIRECTORS:**

**Title:** CFO  
**Name:** DUBOSE, GARY W  
**Address:** 94-1036 WAIPIO UKA ST 110  
**City-St-Zip:** WAIPAHU, HI 96797 US

**Title:** ACFO  
**Name:** SCHLEGEL, ROBERT A  
**Address:** 94-1036 WAIPIO UKA ST 110  
**City-St-Zip:** WAIPAHU, HI

**Title:** SECT  
**Name:** DUBOSE, TIFFANY N  
**Address:** 94-1036 WAIPIO UKA ST 110  
**City-St-Zip:** WAIPAHU, HI 96797

I hereby 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 all other like empowered.

SIGNATURE: GARY W DUBOSE

CFO

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date