

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000033296

Entity Name: BORE HAWG, INC.

**FILED**  
**Jan 21, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4269 NW 44TH AVE  
SUITE B  
OCALA, FL 34482

**New Principal Place of Business:**

**Current Mailing Address:**

4269 NW 44TH AVE  
SUITE B  
OCALA, FL 34482

**New Mailing Address:**

FEI Number: 20-4494011

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

RIGGS, JASON  
4269 NW 44TH AVE  
SUITE B  
OCALA, FL 34482 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: D  
Name: RIGGS, JASON  
Address: 4269 NW 44TH AVE STE B  
City-St-Zip: OCALA, FL 34482

Title: D  
Name: PAULEY, GARY  
Address: 4269 NW 44TH AVE STE B  
City-St-Zip: OCALA, FL 34482

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: JASON W. RIGGS

D

01/21/2011

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

\_\_\_\_\_  
Date