

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000035816

FILED
Jan 15, 2007
Secretary of State

Entity Name: BODYGUARD GRAPHICS INCORPORATED

Current Principal Place of Business:

6205 LAKES DIVIDE ROAD
TAMPA, FL 33637

New Principal Place of Business:

6624 SUMMER HAVEN DRIVE
RIVERVIEW, FL 33569

Current Mailing Address:

6205 LAKES DIVIDE ROAD
TAMPA, FL 33637

New Mailing Address:

6624 SUMMER HAVEN DRIVE
RIVERVIEW, FL 33569

FEI Number: 20-2361462

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANKERSON, JERMAINE D
6205 LAKES DIVIDE ROAD
TAMPA, FL 33637 US

Name and Address of New Registered Agent:

HANKERSON, JERMAINE D
6624 SUMMER HAVEN DRIVE
RIVERVIEW, FL 33569 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: JERMAINE HANKERSON

01/15/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HANKERSON, JERMAINE D
Address: 6205 LAKES DIVIDE ROAD
City-St-Zip: TAMPA, FL 33637

Title: V () Delete
Name: HANKERSON, ANDREA W
Address: 6205 LAKES DIVIDE ROAD
City-St-Zip: TAMPA, FL 33637

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HANKERSON, JERMAINE D
Address: 6624 SUMMER HAVEN DRIVE
City-St-Zip: RIVERVIEW, FL 33569

Title: V (X) Change () Addition
Name: HANKERSON, ANDREA W
Address: 6624 SUMMER HAVEN DRIVE
City-St-Zip: RIVERVIEW, FL 33569

I hereby certify that the information supplied with this filing does not qualify for the 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: JERMAINE HANKERSON

P

01/15/2007

Electronic Signature of Signing Officer or Director

Date