

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000111191

Entity Name: BONE ISLAND, INC.

FILED
Jan 18, 2007
Secretary of State

Current Principal Place of Business:

5390 U.S. HIGHWAY ONE
STOCK ISLAND
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

5390 U.S. HIGHWAY ONE
STOCK ISLAND
KEY WEST, FL 33040

New Mailing Address:

FEI Number: 20-5476807

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAVANAUGH, EMMETT PATRICK
1117 WHITEHEAD STREET
KEY WEST, FL 33040 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: PD () Delete
Name: KAVANAUGH, EMMETT PATRICK
Address: 1117 WHITEHEAD STREET
City-St-Zip: KEY WEST, FL 33040

Title: VD () Delete
Name: FERNANDEZ, KIMBERLY SUZAN
Address: 223 PIRATES PLACE
City-St-Zip: JUPITER, FL 33469

Title: SD () Delete
Name: CUTILLAS, LOURDES R
Address: 10445 S.W. 70TH AVENUE
City-St-Zip: MIAMI, FL 33156

Title: TD () Delete
Name: MCGOUGH, CATHERN RUTH
Address: 270 COYOTE TRAIL
City-St-Zip: CORRALES, NM 87048

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 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: EMMETT PATRICK KAVANAUGH

PRES

01/18/2007

Electronic Signature of Signing Officer or Director

Date