

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000068482

Entity Name: BOYLE & BOYLE, INC.

FILED
Feb 04, 2009
Secretary of State

Current Principal Place of Business:

14 WEST HICKORY ST
ARCADIA, FL 34266

New Principal Place of Business:

Current Mailing Address:

14 WEST HICKORY ST
ARCADIA, FL 34266

New Mailing Address:

FEI Number: 26-0383915

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOYLE, THOMAS E
10 NORTH 10TH ST.
HAINES CITY, FL 33844 US

Name and Address of New Registered Agent:

BOYLE, THOMAS E
409 CORTEZ DR
PT CHARLOTTE, FL 33980 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: THOMAS E BOYLE

02/04/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: BOYLE, THOMAS E
Address: 10 NORTH 10TH ST.
City-St-Zip: HAINES CITY, FL 33844

Title: V. P () Delete
Name: BOYLE, GARY T
Address: 2271 11TH ST NW
City-St-Zip: WINTER HAVEN, FL 33881

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: BOYLE, THOMAS E
Address: 409 CORTEZ DR
City-St-Zip: PT CHARLOTTE, FL 33980

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: THOMAS BOYLE

PRES

02/04/2009

Electronic Signature of Signing Officer or Director

Date