## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P19441

Address:

City-St-Zip:

Entity Name: BOWLING GREEN INN OF PENSACOLA, INC

FILED Jan 19, 2006 Secretary of State

That y rame. Bevicing officer with or years and a second s						
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
2068 HEAL NAVARRE,	THCARE AVE , FL 32566	US				
Current Mailing Address:			New Maili	New Mailing Address:		
105 N BASCOM AVE SECON FLOOR, STE 202 SAN JOSE, CA 95128 US			SUITE 600	20400 STEVENS CREEK BOULEVARD SUITE 600 CUPERTINO, CA 95014 US		
FEI Number:	58-1795523	FEI Number Applied For ( )	FEI Number Not Appli	cable ( ) C	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
2731 EXEC SUITE 4	/ICES, INC. CUTIVE PARK [ FL 33331 US	DRIVE				
The above in the State		ubmits this statement for the purp	oose of changing it	s registered offic	e or registered agent, or both,	
SIGNATURE:						
Electronic Signature of Registered Agent					Date	
Election Campaign Financing Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	RHODES, JERO	AVE, SECOND FLOOR	Title: Name: Address: City-St-Zip:	RHODES, JEROM	RD LANE, SUITE304	
Title: Name: Address: City-St-Zip:	BISHOP, JEFF	Delete AVE, SECOND FLOOR 95128	Title: Name: Address: City-St-Zip:	BISHOP, JEFF	hange()Addition RD LANE, SUITE304 PA 19317	
Title: Name: Address: City-St-Zip:	SYLVIA, KATHLE	AVE, SECOND FLOOR	Title: Name: Address: City-St-Zip:	SYLVIA, KATHLEE	CREEK BOULEVARD, SUITE 600	
Title: Name: Address: City-St-Zip:	HOGGE, KEVIN 105 N BASCOM SAN JOSE, CA		Title: Name: Address: City-St-Zip:	HOGGE, KEVIN 20400 STEVENS ( CUPERTINO, CA		
Title: Name:	D ()I	Delete ME	Title: Name:	D (X) CI RHODES, JEROM	hange()Addition IE	

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.

Address:

608 CHADDS FORD LANE. SUITE304

City-St-Zip: CHADDS FORD, PA 19317

SIGNATURE: KEVIN HOGGE D 01/19/2006

105 N BASCOM AVE. SECOND FLOOR

SAN JOSE, CA 95128