

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P38257

FILED  
Jan 28, 2008  
Secretary of State

Entity Name: BOYKEN INTERNATIONAL, INC.

## Current Principal Place of Business:

4901 VINELAND RD  
STE 350  
ORLANDO, FL 32811 US

## New Principal Place of Business:

## Current Mailing Address:

400 NORTHRIDGE ROAD  
STE 1200  
ATLANTA, GA 30350 US

## New Mailing Address:

FEI Number: 58-1418831      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: PCD ( ) Delete  
Name: BOYKEN, DONALD R  
Address: 535 AVIGNON COURT  
City-St-Zip: DUNWOODY, GA 30350

Title: VD ( ) Delete  
Name: SCHRANK, EDWARD  
Address: 509 MAJESTIC OAK DR  
City-St-Zip: APOPKA, FL 32712 40

Title: VP ( ) Delete  
Name: MORTIMER, DAVID S  
Address: 145 WENTWORTH  
City-St-Zip: ALPHARETTA, GA 30022

Title: TD ( ) Delete  
Name: HARRISON, JAMES  
Address: 2040 FEDERAL ROAD  
City-St-Zip: ROSWELL, GA 30075

Title: CONT ( ) Delete  
Name: LONG, CHRISTINE  
Address: 1446 KEYS CROSSING DR  
City-St-Zip: ATLANTA, GA 30319

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCD (X) Change ( ) Addition  
Name: BOYKEN, DONALD R  
Address: 4561 OLDE PERIMETER WAY, UNIT 306  
City-St-Zip: ATLANTA, GA 30346

Title: VP (X) Change ( ) Addition  
Name: SCHRANK, EDWARD  
Address: 509 MAJESTIC OAK DR  
City-St-Zip: APOPKA, FL 32712 40

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: CONT (X) Change ( ) Addition  
Name: LONG, CHRISTINE  
Address: 10140 N COLEMAN RD  
City-St-Zip: ROSWELL, GA 30075

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: CHRISTINE LONG

CONT

01/28/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date