## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P92000007083

FILED May 18, 2006 Secretary of State

Entity Name: BOONE D	DISTRIBUTORS, INC.			
Current Principal Place of Business:		New Principal Place of Business:		
2025 CRYSTAL GROVE I LAKELAND, FL 33801		4255 S PIPKIN ROAD LAKELAND, FL 33811	US	
Current Mailing Address	s:	New Mailing Address:		
2025 CRYSTAL GROVE I LAKELAND, FL 33801		4255 S PIPKIN ROAD LAKELAND, FL 33811	US	
FEI Number: 59-3152142	FEI Number Applied For ( ) FEI N	lumber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agen			New Registered Agent:	
KNOWLTON, KEVIN C 225 EAST LEMON ST., S LAKELAND, FL 33801				
The above named entity s in the State of Florida.	submits this statement for the purpose	e of changing its registered o	office or registered agent, or both,	
SIGNATURE:				
Electroni	ic Signature of Registered Agent		Date	
In accordance with s. 607.193 Election Campaign Financing	B(2)(b), F.S., the corporation did not receiv Trust Fund Contribution ( ).	e the prior notice.		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: DP ()	Delete	Title: DP (X	() Change ( ) Addition	

BOONE, ROBERT F BOONE, ROBERT F Name: Name: 2025 CRYSTAL GROVE DR Address: 4255 S PIPKIN ROAD Address: City-St-Zip: LAKELAND, FL City-St-Zip: LAKELAND, FL 33811 Title: () Delete Title: (X) Change ( ) Addition

BOONE, GLENN H BOONE, GLENN H Name: Name:

Address: 2025 CRYSTAL GROVE DR Address: 4255 S PIPKIN ROAD LAKELAND, FL LAKELAND, FL 33811 City-St-Zip: City-St-Zip:

Title: Title: ( ) Delete (X) Change ( ) Addition

Name: BOONE, ROBERT J Name: BOONE, ROBERT J Address: 2025 CRYSTAL GROVE DR Address: 4255 S PIPKIN ROAD City-St-Zip: LAKELAND, FL City-St-Zip: LAKELAND, FL 33811

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: ROBERT J BOONE Τ 05/18/2006