2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000071722

BOLAND, ARDÍS L

WINTER HAVEN, FL

9650 W. LAKE RUBY DR.

Name:

Address:

City-St-Zip:

FILED Feb 19, 2009 Secretary of State

Entity Nai	me: BOLANE	PRODUCTION SUPPLY, INC			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
507 BURN WINTER H	IS LANE HAVEN, FL 33	3884			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
507 BURN WINTER H	IS LANE HAVEN, FL 33	3884			
FEI Number	: 59-3210244	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
BLANKENSHIP, RANDALL G ESQ 170 E. CENTRAL AVE. WINTER HAVEN, FL US			170 E. CENTRAL AVE.	BLANKENSHIP, RANDALL G ESQ 170 E. CENTRAL AVE. WINTER HAVEN, FL 33881 US	
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				02/19/2009	
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financir	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (BOLAND, JOH 9650 W. LAKE WINTER HAVE	RUBY DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (BOLAND, JOH 1150 INTERLO WINTER HAVE	CHEN DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title [.]	D () Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JOHN M. BOLAND **PRES** 02/19/2009