

2005 FOR PROFIT CORPORATION ANNUAL REPORT

5/26/2005-90026-023-\$150.00-\$150.00

DOCUMENT # P97000005127.2	
1. Entity Name BODDEN & COMPANY, INC.	



Principal Place of Business 677 MASON AVE DAYTONA BEACH, FL 32114	Mailing Address 677 MASON AVE DAYTONA BEACH, FL 32114
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FILED

05 JUN 10 PM 1:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



05172005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3423614	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent BODDEN, RICARDO 677 MASON AVE DAYTONA BEACH, FL 32114
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of, the registered agent.

SIGNATURE Ricardo C. Bodden (NOTE: Registered Agent signature required when re-registering) DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BODDEN, RICARDO 6778 MASON AVE DAYTONA BEACH, FL 32114
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IN THIS SPACE**

6/10

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ricardo C. Bodden Date 6-7-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # _____