

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Jun 05 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000083350  
1. Corporation Name

THE BOYLE GROUP INC.

Principal Place of Business

2627 MCCORMICK DR  
102  
CLEARWATER FL 34619  
US

Mailing Address

2627 MCCORMICK DR  
102  
CLEARWATER FL 34619  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/26/97

4. FEI Number

59-3469946

Applied For  
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 2625 McCormick DR

22 Suite, Apt. #, etc.  
103

23 City & State  
CLEARWATER FL

24 Zip  
33759

Country  
US

2a. Mailing Address

26 2625 McCormick DR

27 Suite, Apt. #, etc.  
103

28 City & State  
CLEARWATER FL

29 Zip  
33759

Country  
US

9. Name and Address of Current Registered Agent

BOYLE, RICHARD B  
2627 MCCORMICK DR  
102  
CLEARWATER FL 34621

10. Name and Address of New Registered Agent

81 Name

BOYLE, RICHARD B

82 Street Address (P.O. Box Number is Not Acceptable)

2625 McCORMICK DR

83  
103

84 City

CLEARWATER

FL

85 Zip Code

33759

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, to the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Florida Statutes.

SIGNATURE

Richard B Boyle

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
LINDA L BOYLE  
STREET ADDRESS  
2627 MCCORMICK DR, 102  
CITY-ST-ZIP  
CLEARWATER FL

TITLE ☐ DELETE

NAME  
BOYLE, RICHARD B  
STREET ADDRESS  
2627 MCCORMICK DR, 102  
CITY-ST-ZIP  
CLEARWATER FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME  
LINDA L BOYLE  
1.3 STREET ADDRESS  
2625 MCCORMICK DR #102  
1.4 CITY-ST-ZIP  
CLEARWATER FL 33759

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
BOYLE, RICHARD B  
2.3 STREET ADDRESS  
2625 MCCORMICK DR #103  
2.4 CITY-ST-ZIP  
CLEARWATER FL 33759

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
000002551220  
-06/08/98--01080--005  
4.4 CITY-ST-ZIP  
\*\*\*150.00

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Richard B Boyle RICHARD B BOYLE

4/30/98

725-9100