

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 11, 2007 8:00 am
Secretary of State

07-11-2007 90073 033 ***150.00

DOCUMENT # P98000000680

1. Entity Name

BOYDS LDS BOOKS, INC.



Principal Place of Business

8905 CONROY RD.
ORLANDO, FL 32835

Mailing Address

2681 FLORENCE ST
ORLANDO, FL 32818

DO NOT WRITE IN THIS SPACE



07022007 No Chg-P CR2E034 (11/05)

4. FEI Number

59-3484851

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BOYD, WILLIAM H
2681 FLORENCE ST
ORLANDO, FL 32818

**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 registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
O
BOYD, ANNE P
2681 FLORENCE ST
ORLANDO, FL 32818

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BOYD, WILLIAM H
2681 FLORENCE ST
ORLANDO, FL 32818

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-3-07 407 909-9150

Date

Daytime Phone #

ATTACHMENT
40124118

Boyd's LDS Books, Inc.

8905 Conroy Windermere Rd.
Orlando, FL 32835
407-909-9150 phone and fax

To: FLA. DEPT OF STATE

Date: 07-03-07

Acct. # P98000000680

Fax # _____

From: WILLIAM H. BOYD

Total # of pages 1

Subject: CORP. ANNUAL REPORT

PLEASE WAIVE THE [#]400.00 LATE FEE, AS
I DON'T THINK THAT I RECEIVED A RENEWAL
FORM TO REMIND ME THAT MAY 1ST WAS
THE RENEWAL DATE. ALSO, THIS IS THE FIRST
TIME THAT I HAVE NOT FILED IN A TIMELY
MANNER. I WOULD APPRECIATE YOUR CON-
SIDERATION TO WAIVE THE FEE.

WHB