

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000068152

FILED
Jan 12, 2009
Secretary of State

Entity Name: BOFF INVESTMENTS, INC.

Current Principal Place of Business:

942 N. COLLIER BLVD
MARCO ISLAND, FL 34145

New Principal Place of Business:

7995 MAHOGANY RUN LANE
NAPLES, FL 34113

Current Mailing Address:

942 N. COLLIER BLVD
MARCO ISLAND, FL 34145

New Mailing Address:

7995 MAHOGANY RUN LANE
NAPLES, FL 34113

FEI Number: 59-3530050

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRIS, WILLIAM G
247 NORTH COLLIER BLVD.
STE. 202
MARCO ISLAND, FL 34145 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: BRAON-BRASHARES, BARBARA
Address: 942 N. COLLIER BLVD
City-St-Zip: MARCO ISLAND, FL 34145

Title: T () Delete
Name: WILSON, TERI
Address: 137 CLYBURN WAY
City-St-Zip: MARCO ISLAND, FL 34145

Title: PS () Delete
Name: BOFF, JOSEPH D
Address: 7542 SNEAD CT
City-St-Zip: NAPLES, FL 34113

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: JOSEPH D. BOFF

P

01/12/2009

Electronic Signature of Signing Officer or Director

_____ Date