

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 232200

Entity Name: THE BODEN CO.**Current Principal Place of Business:**10445 49TH ST N
CLEARWATER, FL 33762**Current Mailing Address:**10445 49TH ST N
CLEARWATER, FL 33762 US**FEI Number:** 59-0907988**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NEWVILLE, DUANE HPRES
2823 HERON PLACE
CLEARWATER, FL 34622 US*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**Officer/Director Detail :**

Title	VP D
Name	NEWVILLE, ERIC A
Address	8085 CAUSEWAY BLVD. S.
City-State-Zip:	ST. PETERSBURG FL 33707

Title	T D
Name	NEWVILLE, MARILLYN A
Address	2823 HERON PL
City-State-Zip:	CLEARWATER FL 33762

Title	D
Name	NEWVILLE, WAYNE C
Address	2823 HERON PL
City-State-Zip:	CLEARWATER FL 33762

Title	P D
Name	NEWVILLE, DUANE H
Address	2823 HERON PL
City-State-Zip:	CLEARWATER FL 33762

Title	S VP
Name	NEWVILLE, DENISE J
Address	14248 SHEARWATER COURT
City-State-Zip:	CLEARWATER FL 33792

Title	D
Name	NEWVILLE, KURT E
Address	6020 BAHIA DEL MAR CIRCLE #228
City-State-Zip:	ST. PETERSBURG FL 33715

I hereby 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 all other like empowered.

SIGNATURE: DENISE J. NEWVILLE**SECRETARY****03/08/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date