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			
Officer/Director Detail :				
Title	VP	Title	т	
Name	BRAUN-BRASHARES, BARBARA	Name	WILSON, TERI	
Address	7995 MAHOGANY RUN LANE	Address	137 CLYBURN WAY	
City-State-Zip:	MARCO ISLAND FL 34145	City-State-Zip:	MARCO ISLAND FL 34145	
Title	PS			

## 2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000068152

Entity Name: BOFF INVESTMENTS, INC.

### **Current Principal Place of Business:**

7995 MAHOGANY RUN LANE NAPLES. FL 34113

### **Current Mailing Address:**

7995 MAHOGANY RUN LANE NAPLES, FL 34113

### FEI Number: 59-3530050

### Name and Address of Current Registered Agent:

BOFF, JOSEPH D

City-State-Zip: NAPLES FL 34108

6520 THOMAS JEFFERSON COURT

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

Name

Address

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: JOSEPH BOFF

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Address	137 CLYBURN WAY
City-State-Zip:	MARCO ISLAND FL 34145

PRESIDENT

01/20/2020

Date

# FILED Jan 20, 2020 Secretary of State 1599920329CC

Date