

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000096279

Entity Name: BOB ALOU, INC.

Current Principal Place of Business:

3380 STRINGFELLOW ROAD
SAINT JAMES CITY, FL 33956

Current Mailing Address:

3120 ROUTE 94
CHESTER, NY 10918

FEI Number: 20-3261588

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTIN, ROBERT MD
2055 SOUTH ATLANTIC AVE, APT 801
DAYTONA BEACH, FL 32118 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 PD
Name DESTEFANO, ALBERT F
Address 3120 ROUTE 94
City-State-Zip: CHESTER NY 10918

Title SD
Name DESTEFANO, EILEEN P
Address 3120 ROUTE 94
City-State-Zip: CHESTER NY 10918

Title D
Name AMENDOLAGINE, LOUIS P
Address 16 CRANBERRY ROAD
City-State-Zip: WASHINGTONVILLE NY 10992

Title D
Name AMENDOLAGINE, GERI T
Address 16 CRANBERRY ROAD
City-State-Zip: WASHINGTONVILLE NY 10992

Title D
Name MARTIN, ROBERT J
Address 2055 SOUTH ATLANTIC AVE, APT 801
City-State-Zip: DAYTONA BEACH FL 32118

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: ALBERT F DESTEFANO

PRESIDENT

03/08/2015

Electronic Signature of Signing Officer/Director Detail

Date