

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F15000004949

**Entity Name:** BOURNE'S AUTO CENTER, INC.**Current Principal Place of Business:**1720 MASON AVENUE  
DAYTONA BEACH, FL 32117**Current Mailing Address:**1720 MASON AVENUE  
DAYTONA BEACH, FL 32117 US**FEI Number:** 04-2489300**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BOURNE, JASON FRANCIS  
1720 MASON AVENUE  
DAYTONA BEACH, FL 32117 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:** JASON FRANCIS BOURNE

06/21/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                       |
|-----------------|-----------------------|
| Title           | DP                    |
| Name            | BOURNE, JASON FRANCIS |
| Address         | 22 BRENTWOOD DR       |
| City-State-Zip: | NORTH EASTON MA 02356 |

|                 |                        |
|-----------------|------------------------|
| Title           | VP                     |
| Name            | BOURNE, JACQUELINE ANN |
| Address         | 5 HGILL ST             |
| City-State-Zip: | SOUTH EASTON MA 02375  |

|                 |                        |
|-----------------|------------------------|
| Title           | S                      |
| Name            | BOURNE, JACQUELINE ANN |
| Address         | 5 HILL STREET          |
| City-State-Zip: | SOUTH EASTON MA 02375  |

|                 |                       |
|-----------------|-----------------------|
| Title           | T                     |
| Name            | BOURNE, DEBORAH ANN   |
| Address         | 211 PURCHASE STREET   |
| City-State-Zip: | SOUTH EASTON MA 02375 |

|                 |                        |
|-----------------|------------------------|
| Title           | DIRECTOR               |
| Name            | BOURNE, CALVIN FRANCIS |
| Address         | 211 PURCHASE ST        |
| City-State-Zip: | SOUTH EASTON MA 02375  |

*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:** JASON FRANCIS BOURNE

PRESIDENT

06/21/2020

Electronic Signature of Signing Officer/Director Detail

Date