2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F95000006224

1. Entity Name

CARGEX ORLANDO II PROPERTIES, INC.



Principal Place of Business

TWO MONUMENT SQUARE

SUITE 910

PORTLAND, ME 04101

C T CORPORATION SYSTEM

PLANTATION, FL 33324

1200 SOUTH PINE ISLAND ROAD

Mailing Address

38 PERIMETER ROAD LONDONDERRY, NH 03053

FILED Apr 25, 2006 8:00 am Secretary of State

04-25-2006 90111 018 ***150.00

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03312006 No Chg-P CR2E034 (11/05)

4. FEI Number 01-0503241

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

S. Certificate of cita

SITE

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IN THIS SPACE

the obligations of registered agent.	arposo on artinging its registrope amount registrope egan, ar son	.,,
SIGNATURE Signature, typed or printed name of registered agent and title	applicable. (NOTE: Registered Agent signature required when reinstating)	DATE

A. 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. Lam familiar with and accent

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. PD TITLE ALA, ANDREW L NAME 13328 PALOMA DR STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32837 TITLE BORNHEIMER, ALLEN M NAME 76 UPLAND ROAD STREET ADDRESS CITY-ST-ZIP DUXBURY, MA 02332 TITLE RODERICK, RICHARD M NAME STREET ADDRESS 213 TWO LIGHTS RD. CITY-ST-ZIP CAPE ELIZABETH, ME 04107 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP NAME STREET ADDRESS

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Allen M. Bornheimer

4/3/06

603-644-5855

Daytime Phone #