


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jul 07, 2004 08:00 AM
Secretary of State**

DOCUMENT # H56581 1. Entity Name NORDON RESEARCH & DEVELOPMENT, INC.	
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Principal Place of Business 3546 FUTCH ROAD. PLANT CITY, FL 33566	Mailing Address 3546 FUTCH ROAD. PLANT CITY, FL 33566
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07022004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2534841	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent JEERINGS, DONALD 3546 FUTCH ROAD. PLANT CITY, FL 33566
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP JEERINGS, DONALD. 3546 FUTCH ROAD. PLANT CITY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST JEERINGS, NORMA. 3546 FUTCH ROAD. PLANT CITY, FL
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07/07/04-80006-006 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Norma Jeerings*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
NORMA JEERINGS
Date *7/11/04* (813) 734-8818