

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 24, 2004 8:00 am
Secretary of State

02-24-2004 90023 040 ***150.00

DOCUMENT # J65101

1. Entity Name

BORDNER RESEARCH, INC.



Principal Place of Business

25400 US 19 NORTH
SUITE 211
CLEARWATER FL 33763
US

Mailing Address

25400 US 19 NORTH
SUITE 211
CLEARWATER FL 33763
US

94013011



MOORE

CR2E034 (11/03)

2. Principal Place of Business

4709 BRAYTON TERRACE N
Suite, Apt. #, etc.

3. Mailing Address

4709 BRAYTON TERRACE N
Suite, Apt. #, etc.

City & State

PALM HARBOR, FL

Zip
34685

Country

USA

City & State

PALM HARBOR, FL

Zip
34685

Country

USA

4. FEI Number

59-2793719

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GREEN, RICHARD D.
1010 DREW STREET
CLEARWATER FL 34615

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME BORDNER, DIANE C.
STREET ADDRESS 4709 BRAYTON TERRACE N
CITY-ST-ZIP PALM HARBOR FL

TITLE VP ☐ Delete
NAME WAGNER, MARJORIDEL E
STREET ADDRESS 1317 DAWSBURY WAY
CITY-ST-ZIP NEW PORT RICHEY FL 34655

TITLE VP ☐ Delete
NAME LANGE, JOAN B
STREET ADDRESS 7712 CRAIGHURST LOOP
CITY-ST-ZIP NEW PORT RICHEY FL 34655

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 3283 LORI LANE
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *Diane C. Bordner*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/18/04

Date

(727) 797-6552

Daytime Phone #