2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L92093

1. Entity Name BORDNER REAL ESTATE, INC.



FILED
May 02, 2008 08:00 AN
Secretary of State

Principal Place of Business

9220 BONITA BEACH RD

SUITE #101

BONITA SPRINGS, FL 34135 U

Mailing Address

9220 BONITA BEACH RD

SUITE #101

BONITA SPRINGS, FL 34135

US



04292008

No Cha-P

CR2E034 (11/05)

4. FEI Number 65-0213975

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BORDNER, DONALD B 9220 BONITA BEACH RD STE 101 BONITA SPRINGS, FL 34135

DO NOT WRITE IN THIS SPACE

BONITA SPRINGS, FL 34135			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 Signature, typed or printed name of registered agent and lide if applicable (NOTE. Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000945753 05/30/08-80021-016 150.00
10.	OFFICERS AND DIRECTORS				
TITLE	DPS				
NAME	BORDNER, DONALD B				
STREET ADDRESS	9220 BONITA BEACH RD STE101				
CITY-ST-ZIP	BONITA SPRINGS, FL 34135			•	
TITLE					•
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE					
NAME STREET ADDRESS					
CITY-SI-ZIP				DO	NOT WRITE
TITLE NAME				IN	THIS SPACE
STREET ADDRESS					
CITY-SI-ZIP					
TITLE					
NAME					
STREET ADDRESS					

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 attachnosity with an address, with all other like enpowered.

ذ :SIGNATURE

CITY-SI-ZIP

THTLE

NAME

STREET ADDRESS

CITY-SI-ZIP

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

V4/30)08

239-498-210K