2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State
04-26-2007 90233 039 ****61.25

DOCUMENT # N03000010344

1. Entity Name
BUILDERS WITHOUT BORDERS, INC.

Principal Place of Business	Mailing Address
12860 BANYAN CREEK DRIVE FORT MYERS, FL 33908	12860 BANYAN CREEK DRIVE FORT MYERS, FL 33908

04242007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 20-0551131 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DODRILL, DANIEL W
12860 BANYAN CREEK DRIVE
FORT MYERS, FL 33908

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STC GILLMORE, JOHN 21090 CAPT. NELSON COURT ALVA, FL 33920	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DC JOHN Gillmore 21090 CAPT. NELSON CT. ALVA, FL 33920	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GLADDING, DAWSON DR. 1491 BEACHWOOD TRAIL FORT MYERS, FL 33919	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT GLADDING, DAWSON DR 1491 BEACHWOOD TRAIL FORT MYERS, FL 33919	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCCLELLAN, GUY 842 SW 21ST LANE CAPE CORAL, FL 33991	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD KARL SEAMAN 4128 SW 23 AVE CAPE CORAL FL 33914	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KUNST, LARRY 20185 OCELOT COURT ESTERO, FL 33928	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RENE YOUNGER 1836 SE VANDOON TR. CAPE CORAL FL. 33990	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DODRILL, DANIEL W 12410 MCGREGOR WOODS CIRCLE FORT MYERS, FL 33908	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SIMON MORRIS 7831 TWINEAGLE LANE FT MYERS FL 33912	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BURDETTE, WILLIAM P 15291 SAM SNEAD LANE NORTH FORT MYERS, FL 33917	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MITCHEL HUTCHCRAFT 6600 BRIGECLIFF RD. FT. MYERS FL. 33912	☐ Change ☑ Addition

12. I hereby certify that the information supplied with this filing 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 617, 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: _____ JOHN Gillmore DC 4/25/07 239-633-4105
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT
40084686

DIRECTIC # N030000010344 ADDITION

THOMAS R. ASHW. II
19831 ALLAIRE LANE
FT MYERS FL. 33908