2006 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # P00000102357 1. Entity Name BDR INVESTORS, INC. Principal Place of Business 608 WOOD TRAIL PANAMA CITY, FL 32405 Mailing Address 608 WOOD TRAIL PANAMA CITY, FL 32405 O10 4. F. S. C. 6. Name and Address of Current Registered Agent

FILED Jan 06, 2006 08:00 AM Secretary of State



01032006

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3703609

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

BRANHAM, RICHARD 608 WOOD TRAIL PANAMA CITY, FL 32405

DO NOT WRITE IN THIS SPACE

SIGNATURE.	Signature, typed or printed name of registered agent and title it	f applicable (NOTE Registere	d Agent signature	required when reinstating)	HMO0011372633 01-09/05-80028-012 150.00 DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.				\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS	1			
TITLE NAME STREET ADDRESS GITY-ST-ZIP	PS BRANHAM, RICHARD 608 WOOD TRAIL PANAMA CITY, FL 32405					
TITLE NAME STREET ADDRESS CITY ST-ZIP	V HERLIHY, MICHAEL T 19 HILLCREST DR SHALIMAR, FL 32579		,			
TITLE NAME STREET ADDRESS CITY+ST-ZIP	V TAYLOR, WILTON T 5969 MOORS OAK DR MILTON, FL 32583			DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WHITESIDE, JAMES C 1150 OLD NURSERY WAY PENSACOLA, FL 32514					
TITLE NAME STREET ADDRESS CITY+ST-ZIP	V ESTES, CHRISTOPHER N 23 KEYSER LN GULFPORT, MS 39507					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LANEY, STEPHEN M 235 SHANDWICK PLACE ALPHARETTA, GA 30004			***************************************		

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:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-4-06

850 832-0703

Date