



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2008 08:00 AM
Secretary of State

| | |
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| DOCUMENT # P00000111053 1. Entity Name BORMETT COURT REPORTING, INC. |  |
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| Principal Place of Business C/O PATRICIA LEE BORMETT 2450 COMPASS POINTE DR. VERO BEACH, FL 32966 | Mailing Address C/O PATRICIA LEE BORMETT 2450 COMPASS POINTE DR. VERO BEACH, FL 32966 |
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04292008 No Chg-P CR2E034 (11/05)

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|---|---------------------------------------|
| 4. FEI Number 65-1061864 | 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

BORMETT, PATRICIA LEE
 2450 COMPASS POINTE DRIVE
 VERO BEACH, FL 32966

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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)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

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

000000998506
 05/03/08-80072-004 150.00

10. OFFICERS AND DIRECTORS

| | |
|----------------|---------------------------|
| TITLE | D |
| NAME | BORMETT, PATRICIA LEE |
| STREET ADDRESS | 2450 COMPASS POINTE DRIVE |
| CITY-ST-ZIP | VERO BEACH, FL 32966 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
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| TITLE | |
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| STREET ADDRESS | |
| CITY-ST-ZIP | |

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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 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: Patricia Lee Bormett, President PATRICIA LEE BORMETT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 5/01/08 772.978.5945
Date Daytime Phone #