

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000113081
1. Entity Name
BORMAN & BORMAN CLASSICS, INC.



Principal Place of Business
**1300 THIRD STREET S STE 300
NAPLES, FL 34102**

Mailing Address
**1300 THIRD STREET S STE 300
NAPLES, FL 34102**

DO NOT WRITE IN THIS SPACE



01062006 No Chg-P CRZE034 (11/05)

4. FEI Number 20-0298615	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
**FWLER WHITE BOGGS BANKER PA
5811 PELICAN BAY BLVD SUITE 600
NAPLES, FL 34108**

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$350.00**

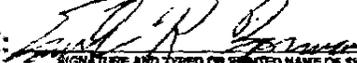
9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST- ZIP	P BORMAN, EARLE 2354 GULF SHORE BLVD. N. NAPLES, FL 34103
TITLE NAME STREET ADDRESS CITY-ST- ZIP	VP BORMAN, BARBARA 2354 GULF SHORE BLVD. N. NAPLES, FL 34103
TITLE NAME STREET ADDRESS CITY-ST- ZIP	VP BORMAN, III, EARLE K. 2268 ASHTON OAKS LANE, #201 NAPLES, FL 34109
TITLE NAME STREET ADDRESS CITY-ST- ZIP	VP BORMAN, WENDELIN K 87 RIVERSIDE AVENUE RIVERSIDE, CT 06878
TITLE NAME STREET ADDRESS CITY-ST- ZIP	
TITLE NAME STREET ADDRESS CITY-ST- ZIP	

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05/03/06-80016-005 150.00

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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:  _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____