


2004 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Mar 08, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P27770</b> 1. Entity Name CARGEX ORLANDO PROPERTIES, INC.	
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Principal Place of Business TWO MONUMENT SQUARE SUITE 910 PORTLAND, ME 04101 US	Mailing Address TWO MONUMENT SQUARE SUITE 910 PORTLAND, ME 04101 US
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**DO NOT WRITE IN THIS SPACE**

02042004 No Chg-P CR2E034 (10/03)

4. FEI Number 04-3073131	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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**6. Name and Address of Current Registered Agent**

THE PRENTICE-HALL CORPORATION SYSTEM INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE, FL 32301

**DO NOT WRITE  
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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00..**  
**After May 1, 2004 Fee will be \$550.00**

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	SD ALA, ANDREW 13329 PALOMA DR. ORLANDO, FL 32837
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD BORNHEIMER, ALLEN M. 76 UPLAND ROAD DUXBURY, MA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RODERICK, RICHARD M 213 TWO LIGHTS RD CAPE ELIZABETH, ME 04107
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000081216  
03/08/04-80140-019 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:**

Allen M. Bornheimer

2/24/04

603-644-5855

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #