

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 25, 2006 8:00 am**  
**Secretary of State**

04-25-2006 90111 017 \*\*\*150.00

**DOCUMENT # P27770**

1. Entity Name  
**CARGEX ORLANDO PROPERTIES, INC.**



Principal Place of Business  
**TWO MONUMENT SQUARE  
SUITE 910  
PORTLAND, ME 04101 US**

Mailing Address  
**38 PERIMETER ROAD  
LONDONDERRY, NH 03053 US**

40061000



03312006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**04-3073131**

Applied For  
Not Applicable

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

**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, 2006 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 13328 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	

**DO NOT WRITE  
IN THIS SPACE**

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:** \_\_\_\_\_

**Allen M. Bornheimer**

**4/3/06**

**603-644-5855**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #