

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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Mar 25 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P93000015429 (2)

1. Corporation Name  
BOURDON, INC.

Principal Place of Business  
12910 SE FEDERAL HWY  
HOBE SOUND FL 33455

Mailing Address  
12910 SE FEDERAL HWY  
HOBE SOUND FL 33455-5707



|                                |                        |                                                                                                                                                             |  |                                                 |                                       |
|--------------------------------|------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------|---------------------------------------|
| 2. Principal Place of Business |                        | 2a. Mailing Address                                                                                                                                         |  | 3. Date Incorporated or Qualified<br>02/23/1993 | 3a. Date of Last Report<br>04/16/1996 |
| 21 Suite, Apt. #, etc.         | 26 Suite, Apt. #, etc. | 4. FEI Number<br>65-0392096                                                                                                                                 |  | Applied For<br>Not Applicable                   |                                       |
| 22 City & State                | 27 City & State        | 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                   |  | \$8.75 Additional Fee Required                  |                                       |
| 23 Zip                         | 28 Zip                 | 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/>                                                                          |  | \$5.00 May Be Added to Fees                     |                                       |
| 24 Country                     | 29 Country             | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |  |                                                 |                                       |

9. Name and Address of Current Registered Agent

BOURDON, DONNA J  
12910 SE FEDERAL HWY  
HOBE SOUND FL 33455

10. Name and Address of New Registered Agent

81 Name STEVEN L. BOURDON  
82 Street Address (P.O. Box Number is Not Acceptable)  
12910 S.E. Federal Hwy  
83  
84 City Hobe Sound FL 85 Zip Code 33455

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors and I, the undersigned, accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Steven L. Bourdon* DATE: 03-19-97  
(NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS |                                              | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                                                                   |
|----------------------------|----------------------------------------------|-------------------------------------------------------|-------------------------------------------------------------------|
| TITLE                      | D <input checked="" type="checkbox"/> DELETE | 1.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | BOURDON, DONNA J                             | 1.2 NAME                                              |                                                                   |
| STREET ADDRESS             | 12910 SE FEDERAL HWY                         | 1.3 STREET ADDRESS                                    |                                                                   |
| CITY - ST - ZIP            | HOBE SOUND FL 33455                          | 1.4 CITY - ST - ZIP                                   |                                                                   |
| TITLE                      | D <input type="checkbox"/> DELETE            | 2.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | BOURDON, STEVEN L                            | 2.2 NAME                                              |                                                                   |
| STREET ADDRESS             | 12910 SE FEDERAL HWY                         | 2.3 STREET ADDRESS                                    |                                                                   |
| CITY - ST - ZIP            | HOBE SOUND FL 33455                          | 2.4 CITY - ST - ZIP                                   |                                                                   |
| TITLE                      | <input type="checkbox"/> DELETE              | 3.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |                                              | 3.2 NAME                                              |                                                                   |
| STREET ADDRESS             |                                              | 3.3 STREET ADDRESS                                    |                                                                   |
| CITY - ST - ZIP            |                                              | 3.4 CITY - ST - ZIP                                   |                                                                   |
| TITLE                      | <input type="checkbox"/> DELETE              | 4.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |                                              | 4.2 NAME                                              |                                                                   |
| STREET ADDRESS             |                                              | 4.3 STREET ADDRESS                                    |                                                                   |
| CITY - ST - ZIP            |                                              | 4.4 CITY - ST - ZIP                                   |                                                                   |
| TITLE                      | <input type="checkbox"/> DELETE              | 5.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |                                              | 5.2 NAME                                              |                                                                   |
| STREET ADDRESS             |                                              | 5.3 STREET ADDRESS                                    |                                                                   |
| CITY - ST - ZIP            |                                              | 5.4 CITY - ST - ZIP                                   |                                                                   |
| TITLE                      | <input type="checkbox"/> DELETE              | 6.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       |                                              | 6.2 NAME                                              |                                                                   |
| STREET ADDRESS             |                                              | 6.3 STREET ADDRESS                                    |                                                                   |
| CITY - ST - ZIP            |                                              | 6.4 CITY - ST - ZIP                                   |                                                                   |

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Steven L. Bourdon*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-19-97 541-545-0033  
DATE Daytime Phone