FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P95000036198 (6)

DOCUMENT # P950

1. Corporation Name

BORSUM & ASSOCIATES, INC.

25110					
Principal Place	e of Business	Mailing Address			. BONT EGIDA HIND BUIGT HIND (BUD) (BN) (BN)
1505 SOUTHWIND COURT CASSELBERRY FL 32707		1505 SOUTHWIND C CASSELBERRY FL 3			
				3. Date Incorporated or Qualified 05/04/1995	3a. Date of Last Report
2. Principal Pl 21 Suite, Apt.	ace of Business	2a, Mailing Address 26		4. FEI Number 59-331032	2 Applied For Not Applicable
22 City & State		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 Zip		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	Country 25	7 _I p 29	Country 30	This corporation has liability for inl Florida Statutes	□No
	9. Name and Address of Curren	t Hegistered Agent		10. Name and Address of New Re	gistered Agent
	NE, J. MICHAEL COLONIAL DRIVE		81 Name 82 Street Ad	dress (P.O. Box Number is Not Acceptable	
	IDO FL 32804		83		
			84 City		FL 85 Zip Code
11. Pursuant t or register familiar wit	o the provisions of Sections 607.0502 ed agent, or both, in the State of Floric th. and accept the obligations of, Secti	and 607.1508, Florida Statuti a. Such change was authoriz on 607.0505. Horida Statutes	es, the above named corp ed by the corporation's bo	oration submits this statement for the purpo and of directors. I hereby accept the appoin	ose of changing its registered office itment as registered agent. I am
SIGNATURE	Signature typed or prodestrume of resp. 66 straigers				
12.	OFFICERS AND		FE. Freguletini Agri Esquat in roque 13.		DATE
TITLE	PVST	DELETE	1.1 Till E	ADDITIONS/CHANGES TO OFFIC	
NAME	BORSUM, DOUGLAS L		1.2 NAME		☐ Change ☐ Addition
STREET ADDRESS	1505 SOUTHWIND COURT		1.3 STREET ADDRESS		
C-TY-ST-Z-P	CASSELBERRY FL 32707		1.4 CITY - \$1 - ZIP		
TrTLE	D	DELETE	2 1 TITLE		Change Addition
NAME	BORSUM, DOUGLAS L		2.2 NAME		☐ Change ☐ Addition
STREET ADDRESS	1505 SOUTHWIND COURT		2.3 STREET ADDRESS		
CITY - ST - ZIP	CASSELBERRY FL 32707		2.4.0.11Y S1-ZIP		
TITLE		DELETE	3 1 TITLE		Change Addition
NAME			3.2 NAME		Theorem The Variable
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-SI-ZIP			3.4 CITY - ST - ZIP		
TITLE		☐ DELETE	4 1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		[a.m.gc [] Hoodfell
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST-Z-P			4.4 CiTY - ST - ZIP		
TITLE		☐ DELETE	5 1 Tife(Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CrTY-ST ZIP		
THLE		☐ DELETE	€ 1 TiTLE		Change Addition
NAME		_	6.2 NAME		C Surveyor C May 1041
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CiTY - ST - 7IP		
	certify that the information supplied w	ith this fring is voluntarily furgi-	shed and does not out it.	for the exemples stated in Section 110 67	200

4. I do hereby certify that the information supplied with this fring is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND THEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/96 (407)699-9790

CR2E034 (12/95)