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Apr 28 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 # P95000096431 (8)

1. Corporation Name
D.C. BOARDMAN INC.

Principal Place of Business

830 HWY. 80 W.
LA BELLE FL 33935

Mailing Address

830 HWY. 80 W.
LA BELLE FL 33935

2. Principal Place of Business

21 5634 S.R. 80 W.
Suite, Apt. #, etc.

22

City & State

23 ALVA FL

Zip

24 33920

Country

25 HENDRY

2a. Mailing Address

26 5634 S.R. 80 W.
Suite, Apt. #, etc.

27

City & State

28 ALVA FL

Zip

29 33920

Country

30 HENDRY

9. Name and Address of Current Registered Agent

BOARDMAN, DAMON C
830 HWY. 80 W.
LA BELLE FL 33935

3. Date Incorporated or Qualified

12/18/1995

3a. Date of Last Report

04/24/1996

4. FEI Number

65-0633478

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

PAULINE M. BOARDMAN

82

Street Address (P.O. Box Number is Not Acceptable)

5634 S.R. 80 W.

83

84

City ALVA

FL

85 Zip Code 33920

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Pauline M. Boardman*

Pauline M. Boardman 4/8/97

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME BOARDMAN, DAMON C
STREET ADDRESS 830 HWY. 80 W.
CITY-ST-ZIP LA BELLE FL ☒ DELETE

TITLE V
NAME BOARDMAN, PAULINE M.
STREET ADDRESS 830 HWY 80 W.
CITY-ST-ZIP LABELLE FL ☐ DELETE

TITLE S
NAME BOARDMAN, ANN L.
STREET ADDRESS 830 HWY 80 W.
CITY-ST-ZIP LABELLE FL ☐ DELETE

TITLE T
NAME BOARDMAN, BRIAN C.
STREET ADDRESS 830 HWY 80 W.
CITY-ST-ZIP LABELLE FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P
1.2 NAME BOARDMAN, PAULINE M. ☒ Change ☐ Addition
1.3 STREET ADDRESS 5634 S.R. 80 W.
1.4 CITY-ST-ZIP ALVA FL 33920

2.1 TITLE V
2.2 NAME BOARDMAN, PAULINE M. ☒ Change ☐ Addition
2.3 STREET ADDRESS 5634 S.R. 80 W.
2.4 CITY-ST-ZIP ALVA, FL 33920

3.1 TITLE S
3.2 NAME BOARDMAN DIANN L. ☒ Change ☐ Addition
3.3 STREET ADDRESS 5634 S.R. 80 W.
3.4 CITY-ST-ZIP ALVA FL 33920

4.1 TITLE T
4.2 NAME BOARDMAN, BRIAN C. ☒ Change ☐ Addition
4.3 STREET ADDRESS 5634 S.R. 80 W.
4.4 CITY-ST-ZIP ALVA FL 33920

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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: *Pauline M. Boardman*

Pauline M. Boardman 4/8/97

CR2E034 (9/96)