2007 FOR PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # F73872

Entity Name

THE BERKLEY GROUP, INC.



Principal Place of Business

3015 N. OCEAN BLVD

SUITE 121

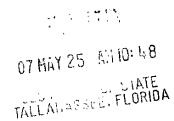
FT. LAUDERDALE, FL 33308

Mailing Address

3015 N. OCEAN BLVD

SUITE 121

FT. LAUDERDALE, FL 33308





04232007

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-2170299

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FOSTER, REBECCA A 3015 N. OCEAN BLVD.

#121

FT. LAUDERDALE, FL 33308

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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 lamiliar 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, 2007 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

AD OFFICEDS AND DIDECTORS	
10.	OFFICERS AND DIRECTORS
TITLE	DC
NAME	LAMBERT, JAMES E
STREET ADDRESS	3015 N OCEAN BLVD STE 121
CITY+ST-ZIP	FORT LAUDERDALE, FL 33308
TITLE	DPS
NAME	FOSTER, REBECCA A
STREET ADDRESS	3015 N OCEAN BLVD, STE 121
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308
TITLE	DVT
NAME	LANDAU, MARC
STREET ADDRESS	3015 N OCEAN BLVD, STE 121
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308
TITLE	DV
NAME	OTTINO, J P III
STREET ADDRESS	3015 N OCEAN BLVD, STE 121
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308
TITLE	D
NAME	POLANSKY, BRUCE
STREET ADDRESS	3015 N OCEAN BLVD, STE 121
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308
TITLE	D
NAME	HIERHOLZER, LARRY
STREET ADDRESS	3015 N OCEAN BLVD, STE 121
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308
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12. Thereby certify that the information supplied with this filling 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

954.563.2444

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