

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 407770

**Entity Name:** BERLEENE, INC

**Current Principal Place of Business:**

400 S. OCEANSHORE BLVD  
FLAGLER BEACH, FL 32136

**Current Mailing Address:**

P.O. BOX 1418  
FLAGLER BEACH, FL 32136

**FEI Number:** 59-1418655

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FOREHAND, ZOE B  
400 S. OCEANSHORE BLVD.  
FLAGLER BEACH, FL 32136 US

*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.*

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

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title PD  
Name FOREHAND, ZOE B  
Address 400 S. OCEANSHORE BLVD  
City-State-Zip: FLAGLER BEACH FL 32136

Title TD  
Name FOREHAND, WILLIAM M  
Address 400 S. OCEANSHORE BLVD  
City-State-Zip: FLAGLER BEACH FL 32136

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** ZOE B. FOREHAND

PD

02/12/2015

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date