

# 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 186106

1. Entity Name  
PERRET DAIRY, INC.



**FILED**  
07 DEC 13 PM 1:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
541879 US HWY 1  
CALLAHAN, FL 32011 US

Mailing Address  
541879 US HWY 1  
CALLAHAN, FL 32011 US

2. Principal Place of Business - No P.O. Box #  
1 Durminning Road

3. Mailing Address  
1 Durminning Road



12062007 Chg-P CR2E034 (12/06)

City & State  
Newton Square, PA

City & State  
Newton Square, PA

4. FEI Number  
59-0748916

Applied For  
Not Applicable

Zip Country  
19073

Zip Country  
19073

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PERRET, MICHAEL E.  
541879 US HWY 1  
CALLAHAN, FL 32011

Name  
Corporation Company of Miami  
Street Address (P.O. Box Number is Not Acceptable)  
201 S. Biscayne Blvd., Suite 1500 (RDB)

City Miami FL Zip Code 33131

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 familiar with, and accept the obligations of registered agent.

SIGNATURE *RAUL J. SALAS, VICE PRESIDENT*  
Signature, typed or printed name of registered agent and title if applicable

12-12-07  
DATE

(NOTE: Registered Agent signature required when reinstating)

Amended AR is \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE S ☒ Delete  
NAME PERRET, MARY SANDRA  
STREET ADDRESS 541879 US HWY 1  
CITY-ST-ZIP CALLAHAN, FL 32011

TITLE P ☐ Change ☒ Addition  
NAME John G. Berg  
STREET ADDRESS 1 Durminning Road  
CITY-ST-ZIP Newtown Square, PA 19073

TITLE PTD ☒ Delete  
NAME PERRET, MICHAEL E  
STREET ADDRESS 541879 US HWY 1  
CITY-ST-ZIP CALLAHAN, FL 32011

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
000113218250  
12/18/07--01013--002 \*\*70.00

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing 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  
JOHN G. BERG, President

December 10, 2007

610 520 1100

Date

Daytime Phone #