

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 12, 2005 08:00 AM
Secretary of State

DOCUMENT # 336212

1. Entity Name
ALLIED PLASTICS CO., INC.



Principal Place of Business

**2001 WALNUT STREET
BOX 3125
JACKSONVILLE, FL 32206**

Mailing Address

**2001 WALNUT STREET
BOX 3125
JACKSONVILLE, FL 32206**



01122005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-1270942** Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**BERGER, GREGORY
177 S. HAMMOCK WAY
PONTE VEDRA BCH, FL**

**DO NOT WRITE
IN THIS SPACE**

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

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, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**11000000227338
02/12/05-80052-007 150.00**

10. OFFICERS AND DIRECTORS

**TITLE PD
NAME BERGER, GREGORY
STREET ADDRESS 177 SEA HAMMOCK WAY
CITY-ST-ZIP PONTE VEDRA BCH, FL**

**TITLE VD
NAME BERGER, DENNIS J
STREET ADDRESS 3209 OLD BARN COURT
CITY-ST-ZIP PONTE VEDRA BCH, FL**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**TITLE
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**TITLE
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STREET ADDRESS
CITY-ST-ZIP**

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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

GREGORY BERGER

Date

Daytime Phone #