

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 379635

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: CLIFF BERRY & ASSOCIATES, INC.

**Current Principal Place of Business:**

700 SE 32ND COURT  
FT LAUDERDALE, FL 33316 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 13079  
FT. LAUDERDALE, FL 33316

**New Mailing Address:**

FEI Number: 59-1350271      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

BERRY, CLIFF SR  
851 ELLER DRIVE  
FT LAUDERDALE, FL 33316 US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BERRY, CLIFF SR.  
Address: 851 ELLER DRIVE  
City-St-Zip: FT LAUDERDALE, FL 33316 US

Title: D ( ) Delete  
Name: BERRY, CLIFF II  
Address: 851 ELLER DRIVE  
City-St-Zip: FT LAUDERDALE, FL 33316 US

Title: D ( ) Delete  
Name: BERRY, SANDRA  
Address: 851 ELLER DRIVE  
City-St-Zip: FT LAUDERDALE, FL 33316 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: CLIFF BERRY SR

D

04/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date