

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

0551903

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 380572

1. Corporation Name

BERRYMAN & HENIGAR, INC.

FILED

99 JAN -7 AM 10: 05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

640 E. HIGHWAY 44
CRYSTAL RIVER FL 32629

Mailing Address

11590 W BERNARDO COURT
SUITE 200
SAN DIEGO CA 92127
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/16/1971

4. FEI Number

59-1325510

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

HENIGAR, ROBERT L.
640 EAST HIGHWAY 44
CRYSTAL RIVER FL 34429

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE
NAME HENIGAR, ROBERT
STREET ADDRESS 10500 N. SURREY PT.
CITY-ST-ZIP CRYSTAL RIVER FL

TITLE CD ☐ DELETE
NAME BERRYMAN, RAY J.
STREET ADDRESS 11590 W BERNARDO COURT #200
CITY-ST-ZIP SAN DIEGO CA

TITLE TD ☐ DELETE
NAME RODRIGUEZ, JON A.
STREET ADDRESS 11590 W BERNARDO COURT #200
CITY-ST-ZIP SAN DIEGO CA

TITLE S ☐ DELETE
NAME BERRYMAN, MARY J.
STREET ADDRESS 11590 W BERNARDO COURT #200
CITY-ST-ZIP SAN DIEGO CA

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VD ☒ Change ☐ Addition
1.2 NAME HENIGAR, ROBERT
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE PCD ☐ Change ☐ Addition
2.2 NAME BERRYMAN, RAY J.
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 500002742715-7
3.4 CITY-ST-ZIP -01/14/99--01120-012
****150.00 ****150.00

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE V ☐ Change ☒ Addition
5.2 NAME GIBBS, PAUL C.
5.3 STREET ADDRESS 1773 E CLEVELAND
5.4 CITY-ST-ZIP HERNANDO, FL 34442

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 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

1/5/99 (619) 451-6100
Date Daytime Phone #

CR2E034 (1/98)