

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 29, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # 836464**

1. Entity Name  
**JERRY BARDING, INC.**



Principal Place of Business  
**901 N.W. 31 AVE.  
POMPAHO BCH., FL 33069**

Mailing Address  
**901 N.W. 31 AVE.  
POMPAHO BCH., FL 33069**



03132007 No Chg-P CR2E034 (11/05)

4. FEI Number  
**37-0895105**

Applied For  
Not Applicable

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

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

**BARDING, JERRY K.  
901 NW 31 AVE.  
POMPAHO BCH., FL 33069**

**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

*Jerry Barding*  
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, 2007 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>P BARDING, JERRY K. 711 SE 3 ST. DELRAY BCH., FL</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>V BARDING, DOROTHY L. 711 SE 3 ST. DELRAY BCH., FL</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>AS BARDING, KENT 901 NW 31 AVE. POMPAHO BCH., FL</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U000000683411  
04/05/07-00041-020 158.75

**DO NOT WRITE  
IN THIS SPACE**

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:**

*Jerry Barding*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #