

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

FILED
Apr 08, 1999 8:00 am
Secretary of State

04-08-1999 90026 039 ***150.00



PROFIT CORPORATION
 ANNUAL REPORT
 1999

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

DOCUMENT # F07617

1. Corporation Name
FRED BERGER & ASSOCIATES, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business
1135 S. PASADENA AVE
OAKBROOK TOWERS-SUITE 59
CLEARWATER FL 34619
 US

Mailing Address
1634 ARABIAN LANE
PALM HARBOR FL 34685
 US

3. Date Incorporated or Qualified
12/02/1980

4. FEI Number
59-2093764

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 **2451 McMULLEN BOOTH RD**

22 **SUITE 592**

23 **CLEARWATER, FL**

24 **34619** 25 **FLORIDA**

26 **1634 ARABIAN LANE**

27 **PALM HARBOR, FL**

28 **34685** 29 **FLORIDA** 30 **US**

9. Name and Address of Current Registered Agent

BERGER, FRED
1634 ARABIAN LANE
PALM HARBOR FL 34685

10. Name and Address of New Registered Agent

81 Name **HAROLD F. BERGER**

82 Street Address (P.O. Box Number is Not Acceptable)
1634 ARABIAN LANE

83 **PALM HARBOR**

84 City **PALM HARBOR** FL 85 Zip Code **34685**

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]* **do do Y Pmo.** DATE **4-5-99**

12. OFFICERS AND DIRECTORS

TITLE DELETE

NAME **VP HAROLD BERGER**

STREET ADDRESS **1634 ARABIAN LANE**

CITY-ST-ZIP **PALM HARBOR FL**

TITLE DELETE

NAME **PD BERGER, FRED**

STREET ADDRESS **1634 ARABIAN LANE**

CITY-ST-ZIP **PALM HARBOR FL**

TITLE DELETE

NAME **STD DIKMAN, BEVERLY**

STREET ADDRESS **1634 ARABIAN LANE**

CITY-ST-ZIP **PALM HARBOR FL**

TITLE DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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 Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

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]* **do do Y Pmo.** DATE **4-5-99** 727 781-0390

CORPENS4 (11/98)