2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 20, 2004 8:00 am
Secretary of State
04-21-2004 90081 009 ***150.00

DOCUMENT # F96000006893

1. Entity Name
HALLBERG MFG. CORPORATION

66423034

MOORE CR2E034 (11/03)

Principal Place of Business	Mailing Address
1812 N. FT HARRISON CLEARWATER FL 33755	PO BOX 23985 TAMPA FL 33623

2. Principal Place of Business	3. Mailing Address
8340 Ulmerton Road	
Suite, Apt. #, etc. #232	Suite, Apt. #, etc.
City & State LARGO, FL	City & State
Zip 33771 Country USA	Zip Country

4. FEI Number 39-1400638 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HALLBERG, CHARLES 35571 SR 70 E. PO BOX 331 MYAKKA CITY FL 34251-0331	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HALLBERG, CHARLES PO BOX 331; 35571 SR 70 E. MYAKKA CITY FL 34251-0331	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition President & Secretary XX HALLBERG, CHARLES PO Box 331: 35571 SR 70 E MYAKKA CITY, FL 34251-0331
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP HENGEN, KEN 21036 N. RT. 59 BARRINGTON IL 60010	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T HALLBERG, CLARK N6568 ANDERSON DRIVE DELAVAN WI 53115	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition VP/Internet Sales KLIENSCHMIDT, CHRISTEN 29170 Stonewood Rd #10 TEMECULA, CA 92591
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S HALLBERG, CHARLES 1812 N. FT HARRISON CLEARWATER FL 33755	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHAEFER, BERNARD 3017 BEECHWOOD COURT HUBERTUS WI 53033	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WERLEIN, LINDA PO BOX 331 MYAKKA CITY FL 34251	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. 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 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: Charles Hallberg 3/23/04 941 683-7627
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #