

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90160 017 ***150.00

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1. Entity Name

HALLBERG MFG. CORPORATION



Principal Place of Business

3660 EAST BAY
#1021
LARGO FL 33771

Mailing Address

PO BOX 23985
TAMPA FL 33623



2. Principal Place of Business - No P.O. Box #

1201 Seminole Blvd

3. Mailing Address

Suite, Apt. #, etc.
Apt 383

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/07)

City & State
Largo, FL

City & State

4. FEI Number

39-1400638

Applied For

Not Applicable

Zip
33770

Country
Pinellas

Zip

Country

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
3660 EAST BAY
#1021
LARGO FL 33771

Name

~~CHARLES HALLBERG~~

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

1201 Seminole Blvd Apt 383

City

LARGO, FL

FL

Zip Code
33770

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

Charles Hallberg, President

4/10/08

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, 2008 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 PS ☐ Delete
NAME HALLBERG, CHARLES
STREET ADDRESS 3660 EAST BAY DRIVE #1021
CITY-ST-ZIP LARGO FL 33771

TITLE PS ☒ Change ☐ Addition
NAME HALLBERG, CHARLES
STREET ADDRESS 1201 Seminole Blvd, Apt 383
CITY-ST-ZIP LARGO, FL 33770

TITLE VP ☐ Delete
NAME HALLBERG, CLARK
STREET ADDRESS N6568 ANDERSON DR
CITY-ST-ZIP DELAVAN WI 53115

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME HALLBERG, CLARK
STREET ADDRESS N6568 ANDERSON DRIVE
CITY-ST-ZIP DELAVAN WI 53115

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Charles Hallberg President (727) 584-2838

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

4/10/08