

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G01190

Entity Name: SCARBERRY, INC.

FILED
Apr 25, 2005
Secretary of State

Current Principal Place of Business:

% MICHAEL J. SCARBERRY
2150 SOUTH 3RD STREET
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

Current Mailing Address:

% MICHAEL J. SCARBERRY
2150 SOUTH THIRD STREET
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

FEI Number: 59-2248417

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCARBERRY, MICHAEL J.
181 SOLANO CAY CIRCLE
PONTE VEDRA, FL 32082 US

Name and Address of New Registered Agent:

SCARBERRY, MICHAEL J.
124 MARTINIQUE CIRCLE
PONTE VEDRA, FL 32082 US

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.

SIGNATURE: MICHAEL J. SCARBERRY

04/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCARBERRY, MICHAEL J
Address: 181 SOLANO CAY CIRCLE
City-St-Zip: PONTE VEDRA, FL 32082

Title: V () Delete
Name: SCARBERRY, VIRGINIA C
Address: 2630 LOOPRIDGE DR.
City-St-Zip: ORANGE PARK, FL 32065

Title: ST () Delete
Name: SCARBERRY, BARBARA H
Address: 181 SOLANO CAY CIRCLE
City-St-Zip: PONTE VEDRA, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCARBERRY, MICHAEL J
Address: 124 MARTINIQUE CIRCLE
City-St-Zip: PONTE VEDRA, FL 32082

Title: V (X) Change () Addition
Name: SCARBERRY, BARBARA H
Address: 124 MARTINIQUE CIRCLE
City-St-Zip: PONTE VEDRA, FL 32082

Title: ST (X) Change () Addition
Name: SCARBERRY, BARBARA H
Address: 124 MARTINIQUE CIRCLE
City-St-Zip: PONTE VEDRA, FL 32082

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL J. SCARBERRY

P

04/25/2005

Electronic Signature of Signing Officer or Director

Date