

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G09669

Entity Name: BERRY PROPERTIES, INC.

FILED  
Jan 05, 2007  
Secretary of State

## Current Principal Place of Business:

196 SOUTH LAKE MARIAM DRIVE  
WINTER HAVEN, FL 33884

## New Principal Place of Business:

347 AVE. O. S.W.  
WINTER HAVEN, FL 33880

## Current Mailing Address:

P.O. BOX 2904  
WINTER HAVEN, FL 33883

## New Mailing Address:

FEI Number: 59-2371293

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MATTOX, RAY  
316 WEST CENTRAL AVENUE  
WINTER HAVEN, FL 33880 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BERRY, WILLIAM A.,  
Address: 196 SO. LAKE MARIAM DR.  
City-St-Zip: WINTER HAVEN, FL

Title: VD ( ) Delete  
Name: BERRY, WILLIAM W.,  
Address: 3817 CHERERELY DR EAST  
City-St-Zip: LAKELAND, FL 33813

Title: VD ( ) Delete  
Name: BERRY, ALLEN W.,  
Address: 795 AVE T S.E.  
City-St-Zip: WINTER HAVEN, FL 33884

Title: STD ( ) Delete  
Name: BERRY, DENNIS,  
Address: 711 WATCH ISLAND BEACH  
City-St-Zip: CHESAPEAKE, VA 23320

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: WILLIAM A. BERRY

PD

01/05/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date