

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Norman  
Secretary of State  
DIVISION OF CORPORATIONS

**APPROVED  
AND  
FILED**

95 MAY -1 AM 4:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # G53158**

**(3)**

1. Corporation Name

**BEREA WIL POWER INC.**

Principal Place of Business

**1750 JAMAICA WAY, #321  
PUNTA GORDA FL 33950**

Mailing Address

**1750 JAMAICA WAY, #321  
PUNTA GORDA FL 33950**

DO NOT WRITE IN THIS SPACE

3. Certificate Issued For Quarter

**08/08/1983**

3a. Date of Last Report

**04/18/1994**

4. FEI Number

**59-2409889**

Approved For

Not Applicable

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 has liability for intangible tax under S. 199.032,  
Florida Statutes. ☐ Yes ☒ No

2. Principal Place of Business

21

2a. Mailing Address

26

State, Apt. # etc.

22

State, Apt. # etc.

27

City & State

23

City & State

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Zip

24

Country

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Zip

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Country

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9. Name and Address of Current Registered Agent

**WILBUR, LEHNERT  
1750 JAMAICA WAY, #321  
SUITE 202  
PUNTA GORDA FL 33950**

10. Name and Address of New Registered Agent

81. Name

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

83

84. City

**FL**

85

Zip Code

11. Pursuant to the provisions of Sections 607.054, 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 Sections 607.054, Florida Statutes.

SIGNATURE

(Signature of Current Registered Agent)

(Signature of New Registered Agent)

(Signature of Officer or Director)

(Signature of Officer or Director)

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME

2. NAME

3. NAME

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40. NAME

**SIGNATURE: Wilbur E. Lehnert President**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**Wilbur E. Lehnert President**

**4/26/95 813-637-4617**