

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2008 8:00 am
Secretary of State

04-16-2008 90034 021 ***150.00

DOCUMENT # H10160

1. Entity Name
VAN E. BERG CONSTRUCTORS, CORP.



Principal Place of Business
**% VAN EDWARD BERG
1716 SUNKISSED DRIVE
TARPON SPRINGS, FL 34689**

Mailing Address
**1716 SUNKISSED DRIVE
TARPON SPRINGS, FL 34689**

60024756



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

3. Mailing Address
P.O. Box 14721

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04122008

Chg-P

CR2E034 (12/06)

City & State

City & State
Clearwater, FL

4. FEI Number

59-2441666

Applied For

Not Applicable

Zip

Country

Zip

33766-4721

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BERG, VAN EDWARD
1716 SUNKISSED DRIVE
TARPON SPRINGS, FL 34689**

7. Name and Address of New Registered Agent

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

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**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **PV** ☐ Delete
NAME **BERG, VAN EDWARD**
STREET ADDRESS **1716 SUNKISSED DRIVE**
CITY-ST-ZIP **TARPON SPRINGS, FL 34689**

TITLE **ST** ☐ Delete
NAME **BERG, GABRIELLA**
STREET ADDRESS **1716 SUNKISSED DRIVE**
CITY-ST-ZIP **TARPON SPRINGS, FL 34689**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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 Chapter 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:

Van E. Berg **Van E. Berg**

4-11-08

(727) 385-3673

727-385-3673

Date

Daytime Phone #