

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 31, 2008 8:00 am**  
**Secretary of State**

03-31-2008 90057 001 \*1,905.00

**DOCUMENT # M80210**

1. Entity Name  
**THE HERRICK COMPANY, INC.**



Principal Place of Business  
**% NORTON HERRICK  
2295 CORPORATE BOULEVARD N W  
BOCA RATON, FL 33431 US**

Mailing Address  
**% NORTON HERRICK  
2295 CORPORATE BLVD STE N W STE 222  
BOCA RATON, FL 33431 US**

66005343



02132008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0050161**

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**HERRICK, NORTON  
2295 CORPORATE BLVD., N.W.  
SUITE 222  
BOCA RATON, FL 33431**

**DO NOT WRITE  
IN THIS SPACE**

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**AS  
BLEVINS, VICTORIA  
2295 CORPORATE BLVD., STE. 222  
BOCA RATON, FL 33431**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**CEOD  
HERRICK, NORTON  
2295 CORPORATE BLVD., STE. 222  
BOCA RATON, FL 33431**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VPAS  
HERRICK, HOWARD  
2 RIDGEDALE AVE  
CEDAR KNOLLS, NJ 07927**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PAS  
HERRICK, MICHAEL  
2 RIDGEDALE AVE  
CEDAR KNOLLS, NJ 07927**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VP  
HERRICK, EVAN  
2 RIDGEDALE AVE., STE. 370  
CEDAR KNOLLS, NJ 07927**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**C  
KERMALLI, NISAR  
2 RIDGEDALE AVE  
CEDAR KNOLLS, NJ 07927**

**DO NOT WRITE  
IN THIS SPACE**

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #