2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000003586

FILED Apr 13, 2007 Secretary of State

Entity Name: BERGERON PARK OF COMMERCE AND INDUSTRY-NORTH OWNER'S ASSOCIATION, INC.

Current P	rincipal Place	of Business:	New Princ	ipal Place of Business:	
	V. 69TH PLACE JDERDALE, FL				
Current M	lailing Addres	s:	New Maili	ng Address:	
19612 S.W # 116	V. 69TH PLACE	Ē			
	JDERDALE, FL	33332			
El Number	: 65-1032376	FEI Number Applied For ()	FEI Number Not Appl	icable () Certificate o	of Status Desired ()
Name and	l Address of C	urrent Registered Agent:	Name and	Address of New Regist	ered Agent:
	V. 69TH PLACE JDERDALE, FL	. 33332 US			
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing i	ts registered office or regi	istered agent, or both,
	e of Florida.	submits this statement for the p	ourpose of changing r	ts registered office or regi	istered agent, or both,
n the State	e of Florida.	submits this statement for the particles in the particles in Signature of Registered Age		ts registered office or regi	
n the State	e of Florida.	ic Signature of Registered Age	ent		te
n the State	e of Florida. RE: Electron S AND DIREC PD () BERGERON, R0 19612 S.W. 691	ic Signature of Registered Age TORS: Delete ONALD M SR	ent	Da	te ERS AND DIRECTOR
n the State SIGNATUI DFFICER: Title: Name: Address:	e of Florida. RE: Electron S AND DIREC PD () BERGERON, R0 19612 S.W. 697 FORT LAUDERI VD () SAIA, PHIL 19612 S.W. 697	ic Signature of Registered Age TORS: Delete ONALD M SR TH PLACE DALE, FL 33332 Delete	ent ADDITION Title: Name: Address:	Da S/CHANGES TO OFFIC	te ERS AND DIRECTOR: Addition
n the State BIGNATUI DFFICER: Vame: Address: City-St-Zip: Vame: Address: Address:	e of Florida. RE: Electron S AND DIREC* PD () BERGERON, Re 19612 S.W. 691 FORT LAUDERI VD () SAIA, PHIL 19612 S.W. 691 FORT LAUDERI STD () DE SAI, PHIL 19612 S.W. 691	ic Signature of Registered Age TORS: Delete ONALD M SR TH PLACE DALE, FL 33332 Delete TH PLACE DALE, FL 33332 Delete DALE, FL 33332	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	Da S /CHANGES TO OFFIC ()Change()A	te ERS AND DIRECTOR: Addition Addition

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RONALD M BERGERON SR P 04/13/2007