## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # N9400005538

1. Entity Name

THE BERRY EDUCATIONAL TRUST, INC.



Principal Place of Business

1465 GULF OF MEXICO DRIVE

B406

LONGBOAT KEY, FL 34228

Mailing Address

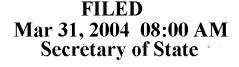
1465 GULF OF MEXICO DRIVE

B406

LAUSTIN G. BERRY
SIGNATURE AND THE OR DIRECTOR

DO NOT WRITE IN THIS SPACE

LONGBOAT KEY, FL 34228





02242004 No Chg-NP

CR2E037 (10/03)

4. FEI Number 65-0533522

x3-25-04

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BERTEAU, JOHN T 1550 RINGLING BLVD. SARASOTA, FL 34236

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

the obliga	anamed entity submits this statement for the pations of registered agent.	purpose of changing its registere	d office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept		
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)				DATE		
	Filing Fee is \$61.25 Due by May 1, 2004	Election Campaign Financ     Trust Fund Contribution.	sing 🔲	\$5.00 May Be Added to Fees	000000100142 03/31/04-80034-013 61.25		
10.	OFFICERS AND DIRE	CTORS					
TITLE NAME STREET ADDRESS CRY-SI-ZIP	TR BERRY, DAVID E 980 IKENA CIRCLE HONOLULU, HI 96821				•		
TITLE NAME STREET ADDRESS CHY-ST-ZIP	TRVS BERRY, CAROLYN A 1465 GULF OF MEXICO DRIVE LONGBOAT KEY, FL 34228			DO NOT WRITE			
TIFLE NAME STREET ADDRESS CITY-ST-ZIP	TR MCMARLIN, REBECCA A 15815 HOLLINGBOURNE AVE HUNTERSVILLE, NC 28076						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR BERRY, BRIAN 239 ATLANTIC BLVD KEY LARGO, FL 33037	-		IN '	IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZP							
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 eath; 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 in Block 10 or Block 113 changed, or on an attachment with an address, with all other like empowered.							