

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000068872

FILED
Jun 29, 2009
Secretary of State

Entity Name: HAPIMAG LAKE BERKLEY CORPORATION

Current Principal Place of Business:

1010 PARK RIDGE CIRCLE
KISSIMMEE, FL 34746

New Principal Place of Business:

Current Mailing Address:

1010 PARK RIDGE CIRCLE
KISSIMMEE, FL 34746

New Mailing Address:

329 N PARK AVENUE
2ND FLOOR
WINTER PARK, FL 32789

FEI Number: 65-1038113

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHWW, INC.
390 N. ORANGE AVENUE
SUITE 1500
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: EGGERSS, HANS J
Address: NEUHOFSTRASSE 8/12 CH-6349
City-St-Zip: BAAR, SW

Title: DS () Delete
Name: MINEGAR, CRAIG A
Address: 250 PARK AVENUE SOUTH, 5TH FLOOR
City-St-Zip: WINTER PARK, FL 32789

Title: DP () Delete
Name: SCHOBINGER, RODOLPHE
Address: NEUHOFSTRASSE 8/12 CH-6349
City-St-Zip: BAAR, SW

Title: ASEC () Delete
Name: SIDLER, ESTHER
Address: 1010 PARK RIDGE CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DS (X) Change () Addition
Name: MINEGAR, CRAIG A
Address: 329 N PARK AVENUE 2ND FLOOR
City-St-Zip: WINTER PARK, FL 32789

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CRAIG A. MINEGAR

DS

06/29/2009

Electronic Signature of Signing Officer or Director

Date