

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000017157

FILED  
May 04, 2005  
Secretary of State

Entity Name: BURGREN ENTERPRISES, INC.

## Current Principal Place of Business:

7829 STATE ROAD 100  
BOX 81  
LAKE GENEVA, FL 32160

## New Principal Place of Business:

## Current Mailing Address:

7829 STATE ROAD 100  
BOX 81  
LAKE GENEVA, FL 32160

## New Mailing Address:

FEI Number: 59-3719412

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BURGREN, JUSTIN MICHAEL  
7829 STATE ROAD 100  
LAKE GENEVA, FL 32160 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: D ( ) Delete  
Name: BURGREN, JUSTIN MICHAEL  
Address: 7829 SR 100, BOX 81  
City-St-Zip: LAKE GENEVA, FL 32160

Title: P ( ) Delete  
Name: BURGREN, JUSTIN MICHAEL  
Address: 7829 SR 100, BOX 81  
City-St-Zip: LAKE GENEVA, FL 32160

Title: D ( ) Delete  
Name: GOMES, SALVATORE R  
Address: 7829 SR 100, BOX 81  
City-St-Zip: LAKE GENEVA, FL 32160

Title: S ( ) Delete  
Name: GOMES, SALVATORE R  
Address: 7829 SR 100, BOX 81  
City-St-Zip: LAKE GENEVA, FL 32160

Title: T ( ) Delete  
Name: GOMES, SALVATORE R  
Address: 7829 SR 100, BOX 81  
City-St-Zip: LAKE GENEVA, FL 32160

Title: V ( ) Delete  
Name: GOMES, SALVATORE R  
Address: 7829 SR 100, BOX 81  
City-St-Zip: LAKE GENEVA, FL 32160

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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 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: JUSTIN MICHAEL BURGREN

P

05/04/2005

Electronic Signature of Signing Officer or Director

Date