

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000025517

**FILED**  
**Mar 23, 2011**  
**Secretary of State**

**Entity Name:** J & M BERRY PROPERTIES, INC.

**Current Principal Place of Business:**

1620 SOUTH DOVER ROAD  
DOVER, FL 33527

**New Principal Place of Business:**

**Current Mailing Address:**

1620 SOUTH DOVER ROAD  
DOVER, FL 33527

**New Mailing Address:**

**FEI Number:** 59-3703537

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NELSON & MCKAY  
4890 W. KENNEDY BLVD  
SUITE 240  
TAMPA, FL 33609 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

**OFFICERS AND DIRECTORS:**

**Title:** PSTD  
**Name:** BERRY, JON  
**Address:** 1620 SOUTH DOVER RD  
**City-St-Zip:** DOVER, FL 33527

**Title:** V  
**Name:** BERRY, MARLA  
**Address:** 12 OLD ASHBAY RD  
**City-St-Zip:** MASON, NH 03048

**Title:** D  
**Name:** BERRY, JON  
**Address:** 1620 SOUTH DOVER RD  
**City-St-Zip:** DOVER, FL 33527

**Title:** D  
**Name:** BERRY, MARLA  
**Address:** 12 OLD ASHBAY RD  
**City-St-Zip:** MASON, NH 03048

I hereby 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 all other like empowered.

**SIGNATURE:** JON BERRY

PSTD

03/23/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date