

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000088142

Entity Name: BERNIE SANITATION, INC.

FILED
Apr 29, 2007
Secretary of State

Current Principal Place of Business:

7833 MCELVEY RD.
PANAMA CITY, FL 32408

New Principal Place of Business:

201 HARRISON AVENUE
PANAMA CITY, FL 32401

Current Mailing Address:

2350 FOXWORTH DRIVE
PANAMA CITY, FL 32405

New Mailing Address:

FEI Number: 59-3753324

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLOAN, TIMOTHY J ESQ
427 MCKENZIE AVE.
PANAMA CITY, FL 32401 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VSTD () Delete
Name: HUMBOLDT, BRIAN L
Address: 2350 FOXWORTH DRIVE
City-St-Zip: PANAMA CITY, FL 32405

Title: PD () Delete
Name: PAYNTER, GAYLE B
Address: 2350 FOXWORTH DRIVE
City-St-Zip: PANAMA CITY, FL 32405

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: BRIAN L. HUMBOLDT

VP

04/29/2007

Electronic Signature of Signing Officer or Director

Date