

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000041843

FILED
Apr 27, 2005
Secretary of State

Entity Name: MULBERRY RIDGE LODGE, INC.

Current Principal Place of Business:

11691 GATEWAY BLVD
SUITE 203
FT. MYERS, FL 33913

New Principal Place of Business:

Current Mailing Address:

11691 GATEWAY BLVD
203
FT. MYERS, FL 33913

New Mailing Address:

FEI Number: 74-3048705 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SARVER, ROBERT L
11691 GATEWAY BLVD
SUITE 203
FT. MYERS, FL 33913 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: PD () Delete
Name: SARVER, ROBERT L
Address: 9232 PINEAPPLE RD.
City-St-Zip: FT. MYERS, FL 33912

Title: VD () Delete
Name: NUTTER, JOHN
Address: 1610 REYNOLDS RD, LOT 176
City-St-Zip: LAKELAND, FL 33801

Title: STD () Delete
Name: SARVER, ROBERT L II
Address: 9233 PINEAPPLE RD.
City-St-Zip: FT. MYERS, FL 33912

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:

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: ROBERT L SARVER

PD

04/27/2005

Electronic Signature of Signing Officer or Director

Date