

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 07, 2004 8:00 am
Secretary of State

05-07-2004 90127 036 ***158.75

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1. Entity Name

BERRY BAY FARMS @ JAYMAR, INC.



Principal Place of Business

**8423 S.R. 674
WIMAUMA FL 33598**

Mailing Address

**P.O. BOX 294
WIMAUMA FL 33598**

2. Principal Place of Business

7648 Nottingham Sky Dr.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Apollo Beach, FL

City & State

Zip

33572

Country

Hillsborough

Country

4. FEI Number

38-3681591

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**TURGEAU, J. MAURICE L
8423 S.R. 674
WIMAUMA FL 33598**

7. Name and Address of New Registered Agent

Name J. Maurice L. Turgeau

**Street Address (P.O. Box Number is Not Acceptable)
7648 Nottingham Sky Dr.**

City Apollo Beach

FL

Zip Code

33572

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *J. Maurice L. Turgeau*

J. Maurice L. Turgeau

4-30-04

Signature, typed or printed name of registered agent and, if applicable, (NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

**9. Election Campaign Financing
Trust Fund Contribution.**

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE P
NAME TURGEAU, J. MAURICE L
STREET ADDRESS 9404 CRESENTLOOP CIRCLE, APT #103
CITY-ST-ZIP TAMPA FL 33619

☐ Delete

TITLE VP
NAME BROWN, LINDA R
STREET ADDRESS 10070 MCINTOSH ROAD
CITY-ST-ZIP DOVER FL 33527

☐ Delete

TITLE SEC
NAME BROWN, G. MARVIN
STREET ADDRESS 10070 MCINTOSH ROAD
CITY-ST-ZIP DOVER FL 33527

☐ Delete

TITLE TRES
NAME TURGEAU, LESLIE A. L
STREET ADDRESS 9404 CRESENTLOOP CIRCLE, APT# 103
CITY-ST-ZIP TAMPA FL 33619

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME Turgeau, J. maurice L.
STREET ADDRESS 7648 Nottingham Sky Dr.
CITY-ST-ZIP Apollo Beach, FL 33572

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE TRES
NAME Turgeau, Leslie A. L.
STREET ADDRESS 7648 Nottingham Sky Dr.
CITY-ST-ZIP Apollo Beach, FL 33572

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *J. Maurice L. Turgeau* **J. Maurice L. Turgeau** **4-30-04** **(813) 642-9866**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #