

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 02, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000048726

1. Entity Name
BERRY BAY FARMS @ JAYMAR, INC.



Principal Place of Business
**7648 NOTTINGHILL SKY DR.
APOLLO BEACH, FL 33572**

Mailing Address
**P.O. BOX 294
WIMAUMA, FL 33598**



03152007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

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
7648 NOTTINGHILL SKY DR.
APOLLO BEACH, FL 33572**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3-22-07

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$350.00**

9. Election Campaign Financing
Trust Fund Contribution ☐

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

**1000000684395
04/06/07-80031-004 150.00**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	TURGEAU, J. MAURICE L
STREET ADDRESS	7648 NOTTINGHILL SKY DR.
CITY-ST-ZIP	APOLLO BEACH, FL 33572
TITLE	VP
NAME	BROWN, LINDA R
STREET ADDRESS	10070 MCINTOSH ROAD
CITY-ST-ZIP	DOVER, FL 33527
TITLE	SEC
NAME	BROWN, G. MARVIN
STREET ADDRESS	10070 MCINTOSH ROAD
CITY-ST-ZIP	DOVER, FL 33527
TITLE	TRES
NAME	TURGEAU, LESLIE A. L
STREET ADDRESS	7648 NOTTINGHILL SKY DR.
CITY-ST-ZIP	APOLLO BEACH, FL 33572
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-22-07

Date

813-376-6146

Daytime Phone #