

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2007 8:00 am
Secretary of State

01-31-2007 90041 042 ***150.00

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1. Entity Name
CHARLES G PERRY CORP.



Principal Place of Business
5841 SENEGAL DRIVE
JUPITER, FL 33458 US

Mailing Address
5841 SENEGAL DRIVE
JUPITER, FL 33458 US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01132007

Chg-P

CR2E034 (12/06)

4. FEI Number
20-2708795

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PERRY, CHARLES G
5841 SENEGAL DRIVE
JUPITER, FL 33458

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent Signature required when re-registering)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D, P ☐ Delete
NAME PERRY, CHARLES G
STREET ADDRESS 5841 SENEGAL DRIVE
CITY-ST-ZIP JUPITER, FL 33458

TITLE T ☐ Delete
NAME PERRY, CHARLES G
STREET ADDRESS 5841 SENEGAL DRIVE
CITY-ST-ZIP JUPITER, FL 33458

TITLE D,VP ☐ Delete
NAME PERRY, JOAN D
STREET ADDRESS 5841 SENEGAL DRIVE
CITY-ST-ZIP JUPITER, FL 33458

TITLE S ☐ Delete
NAME PERRY, JOAN D
STREET ADDRESS 5841 SENEGAL DRIVE
CITY-ST-ZIP JUPITER, FL 33458

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Charles G. Perry
CHARLES G. PERRY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-27-07

Date

Day-time Phone #