## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000076192

Entity Name: DOUGLAS BERRING INVESTMENTS INC.

FILED Apr 15, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2368A FLANDERS WAY 3673 STAGHORN AVENUE SAFETY HARBOR, FL 34695 NORTH PORT, FL 34286 US **Current Mailing Address: New Mailing Address:** 2368A FLANDERS WAY 3673 STAGHORN AVENUE SAFETY HARBOR, FL 34695 NORTH PORT, FL 34286 US FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPIEGEL & UTRERA, P.A. 1840 SW 22 ST 4TH FL MIAMI, FL 33145 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete Title: **PSTD** (X) Change ( ) Addition Name: DOUGLAS, EMMETTT Name: DOUGLAS, EMMETTT 2368A FLANDERS WAY 3673 STAGHORN AVENUE Address: Address: City-St-Zip: SAFETY HARBOR, FL 34695 City-St-Zip: NORTH PORT, FL 34286

Title: D ( ) Delete Title: D (X) Change ( ) Addition
Name: BERRING, WILLIAM J
Name: BERRING, WILLIAM J

Address: 2368A FLANDERS WAY Address: 3673 STAGHORN AVENUE City-St-Zip: SAFETY HARBOR, FL 34695 City-St-Zip: NORTH PORT, FL 34286

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: BERRING, JUDITH Name: BERRING, JUDITH

Address: 2368A FLANDERS WAY Address: 3673 STAGHORN AVENUE
City-St-Zip: SAFETY HARBOR, FL 34695 City-St-Zip: NORTH PORT, FL 34286

Title: D ( ) Delete Title: D (X) Change ( ) Addition

Name:DOUGLAS, DEBORAHName:DOUGLAS, DEBORAHAddress:2368A FLANDERS WAYAddress:3673 STAGHORN AVENUECity-St-Zip:SAFETY HARBOR, FL 34695City-St-Zip:NORTH PORT, FL 34286

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM J. BERRING D 04/15/2006