

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000147642

FILED
Apr 17, 2011
Secretary of State

Entity Name: CTC BERRYMAN PROPERTIES, INC.

Current Principal Place of Business:

3324 WEST GRAY STREET
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

3324 WEST GRAY STREET
TAMPA, FL 33609

New Mailing Address:

FEI Number: 20-3734994

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERRYMAN, CLARA
3324 WEST GRAY STREET
TAMPA, FL 33609 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

OFFICERS AND DIRECTORS:

Title: D,T
Name: BERRYMAN, CLARA
Address: 3324 WEST GRAY STREET
City-St-Zip: TAMPA, FL 33609

Title: DPCE
Name: GAULKIN, CLARA THERESA B
Address: 1923 SEAGULL DR.
City-St-Zip: CLEARWATER, FL 33764

Title: D,VP
Name: BLICK, CHRISTINE B
Address: 736 OAK SHAWDOWS RD.
City-St-Zip: KISSIMMEE, FL 34747

Title: D,VP
Name: BERRYMAN, FRANKLIN R
Address: 306 RED ELM PLACE
City-St-Zip: SEFFNER, FL 33584

Title: D,AT
Name: BERRYMAN, SHAWN D
Address: 629 LAKE ELLA RD.
City-St-Zip: FRUITLAND PARK, FL 34731

Title: D,S
Name: BRANTON, ROXANNE B
Address: 4005 NORTHLAKE DR.
City-St-Zip: WEST RICHLAND, WA 99353

I hereby 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 all other like empowered.

SIGNATURE: CLARA C BERRYMAN

DT

04/17/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date