



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2008 8:00 am
Secretary of State

03-13-2008 90039 022 ***150.00

DOCUMENT # P06000104578			
1. Entity Name RICHARD BERGER ENTERPRISES, INC.			
Principal Place of Business 4327 S. HWY 27 # 425 CLERMONT, FL 34711		Mailing Address 4327 S. HWY 27 # 425 CLERMONT, FL 34711	
2. Principal Place of Business - No P.O. Box # 176 BAYOU BEND RD Suite, Apt. #, etc.		3. Mailing Address 176 BAYOU BEND RD Suite, Apt. #, etc.	
City & State GROVELAND FL		City & State GROVELAND FL	
Zip 34736 Country LAKE		Zip 34736 Country LAKE	
4. FEI Number 20-5414760		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BERGER, RICHARD 4327 S. HWY 27 #425 CLERMONT, FL, FL 34711		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 176 BAYOU BEND RD City GROVELAND FL Zip Code 34736	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, D BERGER, RICHARD 4327 S. HWY 27, # 425 CLERMONT, FL 34711 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 176 BAYOU BEND RD GROVELAND FL 34736
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S, T BERGER, GLORIA H 4327 S. HWY 27, #425 CLERMONT, FL 34711 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 176 BAYOU BEND RD GROVELAND FL 34736
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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: 		Date 3-10-08 Day/Time Phone # 407-375-7321	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Day/Time Phone #</small>	