

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000123334

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: BERLI, INC.

## Current Principal Place of Business:

3401 S. CROSSBILL LOOP  
INVERNESS, FL 34450

## New Principal Place of Business:

3280 S. BLACK MOUNTAIN DR.  
INVERNESS, FL 34450

## Current Mailing Address:

3401 S. CROSSBILL LOOP  
INVERNESS, FL 34450

## New Mailing Address:

3280 S. BLACK MOUNTAIN DR.  
INVERNESS, FL 34450

FEI Number: 87-0785918

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NELSON, JOHN A  
2218 HIGHWAY 44 WEST  
INVERNESS, FL 34453 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BERLI, PETER  
Address: 3401 S. CROSSBILL LOOP  
City-St-Zip: INVERNESS, FL 34450

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: BERLI, PETER  
Address: 3401 S. CROSSBILL LOOP  
City-St-Zip: INVERNESS, FL 34450 US

Title: VD ( ) Change (X) Addition  
Name: MARTIN, JOHN C  
Address: 3280 S. BLACK MOUNTAIN DR.  
City-St-Zip: INVERNESS, FL 34450 US

Title: TD ( ) Change (X) Addition  
Name: MARTIN, DONNA L  
Address: 3280 S. BLACK MOUNTAIN DR.  
City-St-Zip: INVERNESS, FL 34450 US

Title: S ( ) Change (X) Addition  
Name: MARTIN, JENNIFER  
Address: 2409 S. SHELLY AVE.  
City-St-Zip: INVERNESS,, FL 34450 US

I hereby certify that the information supplied with this filing does not qualify 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: JOHN C. MARTIN

VD

04/27/2007

Electronic Signature of Signing Officer or Director

Date