

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 11, 2002 8:00 am**  
**Secretary of State**

02-11-2002 90154 040 \*\*\*150.00

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**DOCUMENT # P94000039689**

1. Entity Name

**G. BERRY & ASSOCIATES, INC.**

Principal Place of Business

Mailing Address

**807-C VASSAR STREET  
 ORLANDO FL 32804  
 US**

**807-C VASSAR STREET  
 ORLANDO FL 32804  
 US**

2. Principal Place of Business

3. Mailing Address

**1256 Chichester St.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**Orlando, FL**

Zip  
**32803**

Country  
**USA**

Zip  
**32803**

Country  
**USA**

4. FEI Number

**59-3241830**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CARLISLE, RONALD W  
 2731 SILVER STAR RD.  
 ORLANDO FL 32808**

Name

**Ginger Berry Riddle**

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

**1256 Chichester St.**

City

**Orlando**

**FL**

Zip Code

**32803**

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.

SIGNATURE

**Ginger Berry Riddle**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**1/23/02**

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2002 Fee will be \$550.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**PD  
 BERRY, GINGER  
 5786 PEREGRINE AVENUE  
 ORLANDO FL 32819** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**PD  
 Ginger Berry Riddle  
 1256 Chichester St.  
 Orlando, FL 32803** ☒ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**SD  
 HUGHES, JOHN W  
 2731 SILVER STAR RD  
 ORLANDO FL 32808-3935** ☒ Delete

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

TITLE  
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 STREET ADDRESS  
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☐ Delete

TITLE  
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☐ Change ☐ Addition

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☐ Change ☐ Addition

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☐ Delete

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**Ginger Berry Riddle**

**1/23/02**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)