FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS								
1. Corporati	JMENT # PS IN Name LY BERRY GIFTS, INC		14410	(1)				
Principal Place of Business Mailing Address 13151 DRYSDALE 67. 224 COMMERCIAL 13151 DRYSDALE 67. SPRING HILL FL 34609 WEEKI WACHEE, FL. 3 4613								
						Date incorporated or Qualified 02/20/1995	3a. Date of Las	it Report
🗾 Z. Principal F	Place of Business MMERCIAL WA	22	. Mailing Address			4. FEI Number		Applied For
Suite, Apt.	. #, etc.	26	Suite, Apt. #, etc	<u>MMERCIAL (</u>	u Ay	59-3294947	' <u>-</u>	Not Applicable
City & Stat		27				5. Certificate of Status Desired		75 Additional se Required
	I WACHEE, F.	L- 28	City & State WEEKI	LIADUCE +	. /	6. Election Campaign Financing		.00 May Be
Zip	Country		Zip	WACHEE F		Trust Fund Contribution	F └─ Ad	ded to Fees
24 34613	9. Name and Address of	29	34613	30 US/	4	8. This corporation has liability for a Florida Statutes Yes	₩ No	s 199.032,
	O. State Addings o	r current negis	ierea Agent	81	Name	10. Name and Address of New R	egistered Agent	
	HOLLIS J				N	<u> </u>		
	DRYSDALE ST.			82 5	Street Addres	P.O. Box Number is Not Acceptable	e)	
SPRING	3 HILL FL 34609			83				
				84	Dity			·
11. Pursuant t	to the provisions of Sections 6	07 0502 and 603	7 1509 Florido Ci-				FL 85	Zip Code
or register familiar wit	ed agent, or both, in the State th, and accept the obligations	of Florida, Such	change was auth	orized by the corpora	ned corporate ilión's board i	on submits this statement for the purp of directors. I hereby accept the appo	oose of changing its	registered office
SIGNATURE				ites.		, , , , , , , ,		o agent. Lan
12.	Signal, Fell System or printed have of regist			(NOTE Beginned Agent sig	na ne ocione Lwh	an terminating	DAIL	
TITLE	J. OFFICE	RS AND DIREC	T) DELETE	13.		ADDITIONS/CHANGES TO OFFIC		ORS IN 12
NAME				1 1 TITLE 1.2 NAME	PRE	SIDENT	☐ Change	Addition
STREET ADDRESS				1.3 STHEET ADD		LIS J BONK SI DRYSDALE ST		
CITY - ST - 7IP	·			1.4 CHY-\$1-7	500	ling HILL FL:	34609	j
TITLE			DELFTE	2 1 THE	- Pr	100 100	□ Change	☐ Addition
NAME STREET ADDRESS				2.2 NAME				
CIY-SI-ZiP				23 STREET ADD	i			
I'LE			DELETE	2.4 CITY - ST - 21	P 			
iMA				3 1 TITLE 32 NAME			Change	☐ Addition
STREET ADDRESS				33 STREET ADD	RESS			ĺ
HTLE				3 4 CITY - S1 - ZIF	,			
AME			DELETE	4 1 1111.	"		[] Change	Addition
TREET ADDRESS				4.2 NAME				
ITY - ST - ZIP				4.3 STREET ACIDS 4.4 CITY - ST - ZIP				
ILE	· · · · · · · · · · · · · · · · · · ·		DELETE	5 1 TITLE			Change	- Advisor
AME Incl. Language				5.2 NAME			□ cua ige	Add tion
TREET ADDRESS ITY+ST-ZIP				5.3 STREET ADDR	ESS			
T.F			[] DFLETE	5 4 CHY - ST - ZIP			·	
4ME			Clour	6 1 TIPLE			Change	☐ Addition
IREET ADDRESS				62 NAME 63 STREET ADDRI	199			
TY-ST ZIP				ĺ				
certify that the	certry that the information sup he information indicated on this	plied with this films annual record of	ng is voluntarily fur	mished and does not	qualify for the	e exemption stated in Section 119.07	3)(k), Florida Statut	es I further
oath; that La appears in B	an an officer or director of the Block 12 or Block 13 if change	corporation or the	ie receiver or trusti hment with an add	eo empowered to ex- dress.	u accurate an ecute this rep	e exemption stated in Section 119.07(id that my signature shall have the sar ort as required by Chapter 607, Florid	ne legal effect as if a Statutes; and tha	made under it my name

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICE OF DIRECTOR

(904)596-1895