THE NOTE PLANTED ALL ALTER MATE IST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P98000055578**1. Corporation Name

JULIE C. BERRY, INC.

## **FILED** Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90090 012 \*\*\*150.00



Principal Place of Business Mailing Address	
78 HWY. 40 W 78 HWY. 40 W	
INGLIS FL 34449 DO NOT WRITE IN THIS SPACE	
3. Data Incorporated or Qualifed	7
06/19/1998	1
2. Principal Place of Bysiness 2a. Mailing Address 4. FEI Number Applied For	
21 21 56 TO STIMES 26 TO BOX 310 59 3519279 Not Applicable	7
Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  5. Certificate of Status Desired Fee Required	
23 YANKETOWN, FL. 28 YANKETOWN, FL Trust Fund Contribution Added to Fees	
Zin Country Zio Country a This composition owes the current year intentible	
24 34494 - 25 USA 29 34498 - 03/0 30 USA Personal Property Tax.   Yes   No	
9. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent	_
8f Name	
BARTLEY, WILLIAM  82 Street Address (P.O. BoxdNumber is Not Acceptable)	7
78 HWT. 40 W	4
INGLIS FL 34449	
84 City 85 Zia Code	7
YANKELTOWN FL   34498	_
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered	}
SIGNATURE (1) ille Bother Willer Banky 2-/18/49	{
Signature, typed or printed name of registered apart africative a sopticable. (NOTE: Registered Agent algebraic reculted when refinishming)  DATE  UNITE: Registered Agent algebraic reculted when refinishming)	<b>−</b> 86
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STREET AUTHORS	/
14. 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	ا

indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

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<b>*</b>		· /~		
	- 1	1 73	SIGNING OFFICE	
SIGNATURI	E AND TYPED OR P	YOMTED NAME O	SIGNING OFFICE	LOR DIRECTO