

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2005 8:00 am
Secretary of State

02-22-2005 90027 045 ***150.00

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01182005 Chg-P CR2E034 (10/03)

4. FEI Number 59-3529079 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DOCUMENT # P98000073198

1. Entity Name
BERKSHIRE INVESTORS GROUP, INC.



Principal Place of Business
4110 S FLORIDA AVE
STE 200
LAKELAND, FL 33813 US

Mailing Address
4110 S FLORIDA AVE
STE 200
LAKELAND, FL 33813 US

2. Principal Place of Business
3020 S. Florida Ave.
Suite, Apt. #, etc. Suite 101

3. Mailing Address
3020 S. Florida Ave.
Suite, Apt. #, etc. Suite 101

City & State
Lakeland, FL
Zip 33803 Country USA

City & State
Lakeland, FL
Zip 33803 Country USA

6. Name and Address of Current Registered Agent
ADAMS, ROBERT J
4110 S FLORIDA AVE, STE 200
LAKELAND, FL 33813

7. Name and Address of New Registered Agent
Name Adams, Robert J.
Street Address (P.O. Box Number is Not Acceptable)
3020 S. Florida Ave.
Suite 101
City Lakeland FL Zip Code 33803

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 *[Signature]* Registered agent: 2/14/05
Signature, typed or printed name of registered agent, if not applicable (Not required if agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME ADAMS, ROBERT J. ☐ Delete
STREET ADDRESS 4110 S FLORIDA AVE, STE 200
CITY-ST-ZIP LAKELAND, FL 33813

TITLE VPD
NAME ADAMS, D. JOEL ☐ Delete
STREET ADDRESS 4110 S FLORIDA AVE, STE 200
CITY-ST-ZIP LAKELAND, FL 33813

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 3020 S. Florida Ave Suite 101
CITY-ST-ZIP Lakeland, FL 33803

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 3020 S. Florida Ave. Suite 101
CITY-ST-ZIP Lakeland, FL 33803

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

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11/3/05 863 619-7103

[Signature]
D. Joel Adams, VP