

**FILED**  
**May 10, 1999 8:00 am**  
**Secretary of State**

0447427



Berkeley Pennington Associates, Inc.

LADONNA J CODY  
2440 FIRST ST  
FT MYERS FL 33901  
US

Mailing Address  
6001 LADONNA J  
2445 FIRST ST  
FT WERTHS FL 33901  
US

### 3. Date Incorporated or Qualified

21 c/o LaDonna J. Cody

2a. Mailing Address  
26 c/o LaDonna J. Cody

22	12661 New Brittany Blvd	27	12661 New Brittany Blvd
	City & State		City & State
23	Fort Myers, FL	28	Fort Myers, FL

12661 New Brittany Blv  
City & State  
Fort Myers, FL

Zip		Country	Zip		Country
24	33907	25 US	29	33907	30 US

Zip  Country

4. FEI Number	Applied For
	Not Applicable

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

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

8. This corporation owes the current year Intangible Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CODY, LADONNA J  
2139 FIRST ST  
SUITE 2A  
FT MYERS FL 33901

10. Name and Address of New Registered Agent			
81	Name LaDonna J. Cody		
82	Street Address (P.O. Box Number is Not Acceptable) 12661 New Brittany Blvd.		
83			
84	City Fort Myers.	FL	85 Zip Code 33907

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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Dakshina J. Coody

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

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

12.	OFFICERS AND DIRECTORS	
TITLE	DPS	<input type="checkbox"/> DELETE
NAME	Westbrook, Denis S.	
STREET ADDRESS	12661 New Brittany Blvd.	
CITY-ST-ZIP	Fort Myers, FL 33907	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	Westbrook, Denis S.	
STREET ADDRESS	12661 New Brittany Blvd.	
CITY-ST-ZIP	Fort Myers, FL 33907	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information 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.

**SIGNATURE:**

Denis S. Westbrook

4/22/99 4/27/99

741-939-6161

CR2E034 (11/98)