3 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # S37809

1. Entity Name BERKELEY PENNINGTON ASSOCIATES, INC.



Principal Place of Business

C/O LADONNA J. CODY 12661 NEW BRITTANY BLVD FT.MYERS, FL 33907 US Mailing Address

C/O LADONNA J. CODY 12661 NEW BRITTANY BLVD FT.MYERS, FL. 33907 US

FILED Mar 21, 2006 8:00 am Secretary of State

03-21-2006 90015 048 ***158.75

400031.



DO NOT WRITE IN THIS SPACE

02082006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0256780

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Regulary

6. Name and Address of Current Registered Agent

cerpon

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

CODY, LADONNA J P.A. 12661 NEW BRITTANY BLVD. FT MYERS, FL 33907

DO NOT WRITE IN THIS SPACE

09.06

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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financ Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS ^T WESTBROOK, DENIS S. 4226 NEW BRITTANY BLVD / 2.6 FT MYERS, FL 33907	bi New Brittony Bird,			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DAVISON, FRANCESCA 12661 NEW BRITTANY BLVD FORT MYERS, FL 33907				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-\$1-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate end 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 efficience and 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.					