

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000068872

**Entity Name:** HAPIMAG LAKE BERKLEY CORPORATION

**Current Principal Place of Business:**

1010 PARK RIDGE CIRCLE  
KISSIMMEE, FL 34746

**Current Mailing Address:**

329 N PARK AVENUE  
2ND FLOOR  
WINTER PARK, FL 32789

**FEI Number:** 65-1038113

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WHWW, INC.  
390 N. ORANGE AVENUE  
SUITE 1500  
ORLANDO, FL 32801 US

*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.*

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DP  
Name TRIER, SUSANNE  
Address 1010 PARK RIDGE CIRCLE  
City-State-Zip: KISSIMMEE FL 34746  
  
Title DT  
Name SCHUBIGER, ORIANO  
Address NEUHOFSTRASSE 8/12 CH-6349  
City-State-Zip: BAAR

Title DS  
Name MINEGAR, CRAIG A  
Address 329 N PARK AVENUE 2ND FLOOR  
City-State-Zip: WINTER PARK FL 32789  
  
Title ASEC  
Name ESTERMANN, KUNO  
Address NEUHOFSTRASSE 8/12 CH-6349  
City-State-Zip: BAAR

Title GMGR  
Name ESTERMANN, KUNO  
Address NEUHOFSTRASSE 8/12 CH-6349  
City-State-Zip: BAAR

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** CRAIG A. MINEGAR

DS

03/17/2014

Electronic Signature of Signing Officer/Director Detail

Date