

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 471272

1. Entity Name

BERGAU BROTHERS, INC.

Principal Place of Business

3306 SW 7TH LANE
CAPE CORAL FL 33991
US

Mailing Address

PO BOX 150326
CAPE CORAL FL 33915
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-1581598

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BERGAU, MARGARET A.
3306 SW 7 LANE
CAPE CORAL FL 33991

7. Name and Address of New Registered Agent

Name William A. Bergau
Street Address (P.O. Box Number is Not Acceptable)
3306 SW 7th Lane
City Cape Coral FL Zip Code 33991

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.

SIGNATURE

William A. Bergau

4-24-01

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PTDD	<input checked="" type="checkbox"/> Delete
NAME	BERGAU, WILLIAM A	
STREET ADDRESS	3306 SW 7 LANE	
CITY-ST-ZIP	CAPE CORAL FL	
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		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PTSD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Margaret A. Bergau	
STREET ADDRESS	3306 SW 7th Lane	
CITY-ST-ZIP	Cape Coral, FL 33991	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Michael G. Bergau	
STREET ADDRESS	401 NE 15th Ave.	
CITY-ST-ZIP	Cape Coral, FL 33909	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	William A Bergau	
STREET ADDRESS	3306 SW 7 Lane	
CITY-ST-ZIP	Cape Coral, FL 33991	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Margaret A. Bergau
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Margaret A. Bergau

4-24-01

Date

941-594-6556

Daytime Phone #

CR2E034 (10/00)

0635373

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90390 031 ***150.00



DO NOT WRITE IN THIS SPACE