

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F19000000112

**FILED**  
**Mar 16, 2023**  
**Secretary of State**  
**4664107619CC**

**Entity Name:** BERGAMOT MANAGEMENT CORP.

**Current Principal Place of Business:**

101 E. MAIN STREET, SUITE 500  
MOUNT HOREB, WI 53572

**Current Mailing Address:**

101 E. MAIN STREET, SUITE 500  
MOUNT HOREB, WI 53572 US

**FEI Number:** 83-1482939

**Certificate of Status Desired:** No

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

BERLIN PATTEN EBLING, PLLC  
3700 SOUTH TAMiami TRAIL, SUITE 200  
SARASOTA, FL 34239 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            PRESIDENT  
Name            GALLINA, JOSEPH R  
Address        101 E. MAIN STREET, SUITE 500  
City-State-Zip: MOUNT HOREB WI 53572

Title            VP  
Name            EDISON, HOWARD W  
Address        201 E. OGDEN AVENUE  
City-State-Zip: HINSDALE IL 60521

Title            SECRETARY, TREASURER  
Name            MCCLAREN, H. BRUCE  
Address        201 E. OGDEN AVENUE  
City-State-Zip: HINSDALE IL 60521

Title            VP  
Name            ENZENROTH, CRAIG  
Address        101 E. MAIN STREET, SUITE 500  
City-State-Zip: MOUNT HOREB WI 53572

Title            VP  
Name            MCCLAREN, BRIAN BRUCE  
Address        201 EAST OGDEN AVENUE, SUITE  
                  208  
City-State-Zip: HINSDALE IL 60521

Title            VP  
Name            MUELLER, LORNA  
Address        101 E. MAIN STREET, SUITE 500  
City-State-Zip: MOUNT HOREB WI 53572

Title            VP  
Name            BILLER, JAMES D.  
Address        3900 WOODMERE PARK ROAD  
City-State-Zip: VENICE FL 34293

*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:** JOSEPH R. GALLINA

**PRESIDENT**

**03/16/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date