

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F97000001397

FILED  
Apr 04, 2002 8:00 AM  
Secretary of State

Entity Name: ROLYN CONSTRUCTION CORPORATION

**Current Principal Place of Business:**

12312 WILKINS AVE  
ROCKVILLE, MD 20852

**New Principal Place of Business:**

12312 WILKINS AVE  
ROCKVILLE, MD 20852 US

**Current Mailing Address:**

12312 WILKINS AVE  
ROCKVILLE, MD 20852

**New Mailing Address:**

12312 WILKINS AVE  
ROCKVILLE, MD 20852 US

FEI Number: 52-1247718

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BERGMAN, GERTRUDE  
3000 NW 42ND AVE #B203  
COCONUT CREEK, FL 33066 US

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

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CHRM ( ) Delete  
Name: BERGMAN, RONALD  
Address: 12312 WILKINS AVE  
City-St-Zip: ROCKVILLE, MD 20852

Title: PRES ( ) Delete  
Name: BERGMAN, SAMUEL J  
Address: 12312 WILKINS AVE  
City-St-Zip: ROCKVILLE, MD 20852

Title: SEC ( ) Delete  
Name: BERGMAN, LYNNE S  
Address: 12312 WILKINS AVE  
City-St-Zip: ROCKVILLE, MD 20852

Title: TRES ( ) Delete  
Name: BERGMAN, AMANDA G  
Address: 12312 WILKINS AVE  
City-St-Zip: ROCKVILLE, MD 20852

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: AMANDA G. BERGMAN

TRES

04/04/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date