

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G02768

1. Entity Name

FORSBERG CONSTRUCTION, INC.

FILED
Apr 07, 2000 8:00 am
Secretary of State

04-07-2000 90072 042 ***158.75

Principal Place of Business

6475 GOLF COURSE BLVD.
PUNTA GORDA FL 33982

Mailing Address

6475 GOLF COURSE BLVD.
PUNTA GORDA FL 33982-1810

2. Principal Place of Business

3. Mailing Address

Post Office Drawer 511447

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Punta Gorda, FL

Zip

Country

Zip

33951-1447

Country

USA

4. FEI Number

59-2223536

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WENDORF, RICHARD L.
173 ALBERT LN
PT. CHARLOTTE FL 33954

7. Name and Address of New Registered Agent

Name

Jack O. Hackett II, Esquire

Street Address (P.O. Box Number is Not Acceptable)

115 West Olympia Avenue

City

Punta Gorda

FL

Zip Code

33950

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/30/00

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, 2000 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 ☐ Delete
NAME V
STREET ADDRESS WENDORF, BURCE L
CITY-ST-ZIP 424 SW 38TH PL
CAPE CORAL FL 33991

TITLE ☐ Delete
NAME DP
STREET ADDRESS WENDORF, RICHARD L
CITY-ST-ZIP 173 ALBERT LN
PT. CHARLOTTE FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/30/2000 941-637-8500