

# 2001 UNIFORM BUSINESS REPORT (UBR)

0028187 AF

DOCUMENT # L00000014336

1. Entity Name  
BERNTHALER GROUP LLC

FILED

01 FEB -5 PM 3:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
ONE FINANCIAL PLAZA, STE. 2202  
FT LAUDERDALE FL 33394

Mailing Address  
P.O. BOX 5843  
FT LAUDERDALE FL 33310

2. Principal Place of Business  
ONE FINANCIAL PLAZA  
Suite, Apt. #, etc.  
2202

3. Mailing Address  
P.O. BOX 5843  
Suite, Apt. #, etc.

City & State  
FORT LAUDERDALE FL

City & State  
FORT LAUDERDALE FL

Zip  
33394

Country  
U.S.A.

Zip  
33310

Country  
U.S.A.

4. FEI Number  
65-1057441

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

## 6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

## 7. Name and Address of New Registered Agent

Name  
THOMAS BERNTHALER

Street Address (P.O. Box Number is Not Acceptable)  
ONE FINANCIAL PLAZA  
# 2202

City  
FORT LAUDERDALE FL

Zip Code  
33394

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2/2/01

FILE NOW!!! FEE IS \$50.00  
Make Check Payable to Department of State

900003662289--3  
-02/08/01--01105--009  
\*\*\*\*\*50.00 \*\*\*\*\*50.00

## 9. MANAGING MEMBERS/MEMBERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

## 10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

CEO  
THOMAS BERNTHALER  
ONE FINANCIAL PLAZA # 2202  
FT. LAUDERDALE FL. 33394

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

2/2/01 (454) 333-7777

CR2E083 (11/00)