

# 2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

00 JUL 25 AM 10:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

DOCUMENT # L99000009069

1. Entity Name  
BERG AND PAINTER, LLC

Principal Place of Business % CHARLES BERG ENTERPRISES, INC. 1220 NW 53RD AVENUE GAINESVILLE FL 32653	Mailing Address % CHARLES BERG ENTERPRISES, INC. 1220 NW 53RD AVENUE GAINESVILLE FL 32653
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2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number  
59-3637932

Applied For  
Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CHARLES BERG ENTERPRISES, INC.  
1220 N2 53RD AVENUE  
GAINESVILLE FL 32653

INCORRECT

Name  
CHARLES BERG ENTERPRISES  
Street Address (P.O. Box Number is Not Acceptable)  
1220 N.W. 53RD AVENUE  
City  
GAINESVILLE FL Zip Code  
32653

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

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

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PRESIDENT MGRM  
CHARLES W. BERG  
1220 NW 53RD AVENUE  
GAINESVILLE, FL 32563 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VICE-PRESIDENT MGRM  
JAMES F. PAINTER  
2425 NE 19TH DRIVE  
GAINESVILLE, FL 32609 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
000003342610  
-08/01/00--01085--004  
\*\*\*\*\*50.00 \*\*\*\*\*50.00 ☐ Change ☐ Addition

TITLE  
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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: *Charles W. Berg* REQUIRED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

7-13-00 (352)377-0880

Date

Daytime Phone #

CR2E083 (5/00)