

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **M80818**

(1)

1. Corporation Name:

MARGARET B. BORGELT, INC.

Principal Place of Business:

**C/O MARGARET B. BORGELT
12006 INDIAN ROCKS ROAD
LARGO FL 34644**

Mailing Address:

**C/O MARGARET B. BORGELT
12006 INDIAN ROCKS ROAD
LARGO FL 34644**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
05/13/1988

3a. Date of Last Report
04/11/1994

4. FEI Number
59-2884129

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for admissible tax under the
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BORGELT, MARGARET B.
12006 INDIAN ROCKS ROAD
LARGO FL 34644**

81. Name

82. Street Address (P.O. Box Number or Not Applicable)

83.

84. City

FL

85. Zip Code

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing information is true and correct to the best of my knowledge and belief, and I am duly qualified to execute this statement for the purpose of obtaining its registration. I am duly qualified to execute this statement for the purpose of obtaining its registration.

Signature

12. Name and Address of Registered Agent

13. Name and Address of New Registered Agent

**DPT
BORGELT, MARGARET B.
13664 SERENA DR.
LARGO FL**

1. Name ☐ 2. Address ☐
3. Name ☐ 4. Address ☐
5. Name ☐ 6. Address ☐
7. Name ☐ 8. Address ☐
9. Name ☐ 10. Address ☐
11. Name ☐ 12. Address ☐
13. Name ☐ 14. Address ☐
15. Name ☐ 16. Address ☐
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95. Name ☐ 96. Address ☐
97. Name ☐ 98. Address ☐
99. Name ☐ 100. Address ☐

14. I, the undersigned, certify that the information supplied on this filing is voluntarily furnished and is true and correct, and that the information is true and correct to the best of my knowledge and belief, and I am duly qualified to execute this statement for the purpose of obtaining its registration. I am duly qualified to execute this statement for the purpose of obtaining its registration.

SIGNATURE: *Margaret B. Borgelt* **MARGARET B. BORGELT**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

513-95

813-695-7833