

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 04, 2002 8:00 am**  
**Secretary of State**

0483789  
 AV

**DOCUMENT # P00000059180**

**1. Entity Name**  
**WOOD-WARE, INC.**

02-04-2002 90126 020 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

**Principal Place of Business**  
 2628 SURFSIDE BOULEVARD  
 CAPE CORAL FL 33914  
 FL

**Mailing Address**  
 P.O. BOX 100746  
 CAPE CORAL FL 33910  
 FL

**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**4. FEI Number**

65-101852 NOT APPLICABLE

**Applied For**

Not Applicable

Zip

Country

Zip

Country

**5. Certificate of Status Desired**

☐

**\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

BERGMANN, MICHAELA  
 1505 SE 40 STREET STE C  
 CAPE CORAL FL 33904

**7. Name and Address of New Registered Agent**

Name

Gleinig, Daniel

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

2628 Surfside Blvd

City

Cape Coral

FL

Zip Code

33914

**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]*

DANIEL GLEINIG

11/16/02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**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, 2002 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**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	P	<input type="checkbox"/> Delete
NAME	GLEINIG, DANIEL	
STREET ADDRESS	2628 SURFSIDE BLVD	
CITY-ST-ZIP	CAPE CORAL FL 33914	
TITLE	V	<input type="checkbox"/> Delete
NAME	GLEINIG, SABINE I	
STREET ADDRESS	2628 SURFSIDE BLVD	
CITY-ST-ZIP	CAPE CORAL FL 33914	
TITLE		<input type="checkbox"/> Delete
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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]* DANIEL GLEINIG

11/16/02

(941) 590 1744

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)