200	1 UNIFOR	M BUSII	NESS REPO	RT (UB	R)		APPROVE	D		
DOCU 1. Entity Nan		3		APPROVE AND FILED						
BERT COMPANY, INC.							01 SEP 10 PF	2: 36		
Principal Place of Business 1941 SHADY OAKS DR. TALLAHASSEE FL 32303			Mailing Address 1941 SHADY OAKS DR. TALLAHASSEE FL 32303				SECRETARY OF TALLAHASSEE,		4:36 2)	1711 818) 1 88 1
2. Principal F	Place of Business		3. Mailing Address							
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State			City & State			4 . F	El Number		+	lied For Applicable
Zip 	Count	ry	Zip	Country		5 . C	Dertificate of Status Desired	\$8.75 Fee Req	Addit	ional
	6. Name and Add	iress of Current Re	gistered Agent			7. N	lame and Address of New Register	ed Agent		
GEEKER, VAN P				Name	Name					
1322 THOMASWOOD DR.				Street /	Street Address (P.O. Box Number is Not Acceptable)					
	SSEE FL 32312						10			
				City				Zip (Code	
SIGNATURE .	Signature, typed or printed na	rne of registered agent and tisfy its Intangible	itle if applicable. (NOTE: F	egistered office of a signa registered Agent signa FEE IS \$550	ature required w		· ·			
Tax filing requirement and elects to do so. (See criteria on back)			After September 12, Make Check Payable				 Election Campaign Financing Trust Fund Contribution. 			May Be o Fees
11.	D	OFFICERS AND DIF		12.		ADI	DITIONS/CHANGES TO OFFICERS			
title Name Street address City-St-Zip	BERT, CHARLES 1941 SHADY OAK TALLAHASSEE FL	(S DR.	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Chan	ge	☐ Addition
TITLE NAME Street address City-St-Zip			☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Chan	ge	☐ Addition
TITLE Name Street address City-St-Zip	· ~ ·		~~ □ Delete · ~~	TITLE NAME STREET ADDRESS CITY-ST-ZIP			•	- Chang	je − ·	Addition :
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			500004578 -09/10/01 ****150.00	-01083	-04	7
TITLE NAME STREET ADDRESS CITY-ST-ZIP	, .		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				∏ Chanç	je	Addition
TITLE NAME		, <u>, , , , , , , , , , , , , , , , , , </u>	☐ Delete	TITLE NAME				Chang	je	Addition

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 truetee 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 attachmen with an address, with all offier like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

September 10,2001

Daytime Phone #

576-3030

Septemenen 10, 2001

CHANCES H. BREAT

BRAT COMPANY, INC.

1941 SHADY OXICS DRIVE

TALLAHALSKE, FL. 32303

To bestom IT May Concern :

I, CHANCES U. BERT, AS PRESIDENT OF BERT COMPANY, INC.,

DID NOT RECEIVE THE FIRST NOTICE TO FILE A UNIFORM

BUSINESS REPORT IN JANUARY, 2001.

Tynkya,

Charles H. BURT Persipunt