

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 21, 2000 8:00 am
Secretary of State

03-21-2000 90021 022 ***150.00

DOCUMENT # P29055

1. Entity Name

BERGMANN ASSOCIATES, INC.

Principal Place of Business

**ONE PENN CENTER
STE 1700
1617 JFK BLVD 19038**

Mailing Address

**200 1ST FEDERAKL PLAZA
28 EAST MAIN ST
ROCHESTER NE 14614-1915
US**

L0040370



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

200 1st Federal Plaza

3. Mailing Address

Suite, Apt. #, etc.

28 E Main Street

Suite, Apt. #, etc.

City & State

Rochester, NY

City & State

Zip

14614-1915

Country

US

Zip

Country

4. FEI Number

25-1407718

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MURRAY, JOHN R.
250 FAIRWAY POINTE CIRCLE
APT 322
ORALNDO FL 32828**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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, 2000 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
BERGMANN, DONALD J
ONE SOUTH WASHINGTON ST.
ROCHESTER NY**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VSD
DOUGHERTY, BRIAN
ONE SOUTH WASHINGTON ST.
ROCHESTER NY**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
MURRAY, JOHN R
250 FAIRWAY POINTE CIRCLE
ORLANDO FL**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
OLIN, GARY B
ONE SOUTH WASHINGTON ST
ROCHESTER NY**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ISTVAN, JOSEPH J
ONE SOUTH WASHINGTON ST
ROCHESTER NY**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
O'DICKEY, WILLIAM J
ONE SOUTH WASHINGTON ST
ROCHESTER NY**

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

☐ Change ☐ 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 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:

Brian M. Dougherty **Brian M. Dougherty**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/2000

Date

716 232 5135

Daytime Phone #

CR2FC14 (3/99)