

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 29, 2001 08:00 AM**
Secretary of State**DOCUMENT # P95000034087**1. Entity Name
HARTWIG'S COTTAGE NO. 1, INC.

Principal Place of Business

25161 PENNIROYAL DRIVE

BONITA SPRINGS
34134

FL

Mailing Address

25161 PENNIROYAL DRIVE

BONITA SPRINGS
34134

FL

2. Principal Place of Business
4511 PINEHURST GREENS CT.3. Mailing Address
4511 PINEHURST GREENS CT.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

ESTERO

FL

City & State

ESTERO

FL

4. FEI Number

65-0589858

Applied For

Not Applicable

Zip
33928Country
USZip
33928Country
US5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

WEINKAUFF URSULA
25161 PENNY ROYAL DRIVEBONITA SPRINGS
34134

FL

US

7. Name and Address of New Registered Agent

Name

HARTWIG WILFRIED

Street Address (P.O. Box Number is Not Acceptable)
4511 PINEHURST GREENS CT.City
ESTERO

FL

Zip Code
33928

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 **WILFRIED HARTWIG****04/29/2001**

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, 2001 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 D ☐ Delete
NAME HARTWIG MARGARETHA
STREET ADDRESS AM LINDCHEN 13
CITY-ST-ZIP 40670 MEERBUSCH GERMANYTITLE D ☐ Delete
NAME HARTWIG WILFRIED
STREET ADDRESS AM LINDCHEN 13
CITY-ST-ZIP 40670 MEERBUSCH GERMANYTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
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: **WILFRIED HARTWIG**

D

04/29/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)