

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000054059

1. Entity Name

BRENDAN COVE MANAGEMENT CORP.

FILED
Apr 07, 2000 8:00 am
Secretary of State

04-07-2000 90035 019 ***150.00

Principal Place of Business

2524 SW 45TH ST
CAPE CORAL FL 33914
US

Mailing Address

2524 SW 45TH ST
CAPE CORAL FL 34133-0613
US

2. Principal Place of Business

25151 Pennyroyal Dr.
Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 613
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Benita Spring, FL

City & State

Benita Spring, FL

4. FEI Number

65-0596239

Applied For

Not Applicable

Zip

34134

Country

Lee

Zip

34133

Country

Lee

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

EMRICH, MICHAEL
2524 SW 45TH ST
CAPE CORAL FL 33914

7. Name and Address of New Registered Agent

Name
Franz ROSINUS
Street Address (P.O. Box Number is Not Acceptable)
25151 Pennyroyal Dr.
City Benita Spring FL Zip Code 34134

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

Franz Rosinus

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

(NOTE: Registered Agent signature required when reinstating)

DATE

March 30-00

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	PVTS	<input checked="" type="checkbox"/> Delete
NAME	EMRICH, MICHAEL	
STREET ADDRESS	2524 SW 45TH ST	
CITY-ST-ZIP	CAPE CORAL FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PVTS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Franz ROSINUS	
STREET ADDRESS	25151 Pennyroyal Dr.	
CITY-ST-ZIP	Benita Spring, FL	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Franz Rosinus
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Franz ROSINUS President

March 30-00 (941) 949-0990
Date Daytime Phone #

CR2E034 19/99