## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000090570

Entity Name: BERGIE OF FLORIDA, INC.

FILED Apr 15, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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4801 GEORGE RD., STE. 100 TAMPA, FL 33634

Current Mailing Address: New Mailing Address:

360 SHORE DRIVE BURR RIDGE, FL 60521

FEI Number: 59-3541910 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324 US

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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition BERGDOLL, ROBERT A JR BERGDOLL, ROBERT A JR Name: Name: 360 SHORE DRIVE 360 SHORE DRIVE Address: Address: BURR RIDGE, IL 60521 City-St-Zip: BURR RIDGE, IL 60521 City-St-Zip:

Title: DS ( ) Delete Title: DS (X) Change ( ) Addition

 Name:
 BERGDOLL, HOWARD
 Name:
 BERGDOLL, HOWARD

 Address:
 336 HARRIS
 Address:
 336 SHORE DRIVE

 City-St-Zip:
 CLARENDON, IL
 City-St-Zip:
 BURR RIDGE, IL 60521

Title: T ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 QUINTON, JÓHN
 Name:
 QUINTON, JÓHN

 Address:
 360 SHORE DRIVE
 Address:
 360 SHORE DRIVE

 City-St-Zip:
 BURR RIDGE, IL 60521
 City-St-Zip:
 BURR RIDGE, IL 60521

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN QUINTON P 04/15/2004