

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2002 8:00 am
Secretary of State

02-13-2002 90119 046 ***150.00

DOCUMENT # P99000012909

1. Entity Name
DONALD L. BERG ASSOCIATES, INC.

Principal Place of Business

~~22 CRANDON BLVD~~
KEY BISCAYNE FL 33149

Mailing Address

~~22 CRANDON BLVD~~
KEY BISCAYNE FL 33149



2. Principal Place of Business

200 OCEAN LANE DRIVE

Suite, Apt. #, etc.

APT-PA-6

City & State

KEY BISCAYNE, FL.

Zip

33149

Country

DADE

3. Mailing Address

200 OCEAN LANE DRIVE

Suite, Apt. #, etc.

APT-PA-6

City & State

KEY BISCAYNE, FL.

Zip

33149

Country

DADE

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0901763

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BERG, DONALD L

~~22 CRANDON BLVD~~

KEY BISCAYNE FL 33149

7. Name and Address of New Registered Agent

Name

DONALD L. BERG

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

200 OCEAN LANE DRIVE

KEY BISCAYNE, FL. 33149

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

Donald L. Berg, President **DONALD L. BERG** **1-25-2002**

Signature, typed or printed name of registered agent and title, 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, 2002 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 | <input type="checkbox"/> Delete |
| NAME | BERG, DONALD L | |
| STREET ADDRESS | 22 CRANDON BLVD | |
| CITY-ST-ZIP | KEY BISCAYNE FL 33149 | |
| TITLE | P-D | <input type="checkbox"/> Delete |
| NAME | DONALD L. BERG | |
| STREET ADDRESS | 200 OCEAN LANE DRIVE | |
| CITY-ST-ZIP | KEY BISCAYNE, FL 33149 | |
| 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 |
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| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|--|---|
| 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 |
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| 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:

Donald L. Berg
DONALD L. BERG

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-25-2002

Date

305-361-7904

Daytime Phone #

CR2E034 (9/01)