

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 08, 2000 8:00 am**  
**Secretary of State**

03-08-2000 90054 011 \*\*\*150.00

**DOCUMENT # S59769**

1. Entity Name  
**ENGWILLER, INC.**

Principal Place of Business

**5425 39 STREET, EAST  
 BRADENTON FL 34203  
 US**

Mailing Address

**5627 39TH STREET EAST  
 BRADENTON FL 34203-6500  
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0269471**

Applied For  
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ENGWILLER, JOHN D SR  
 5627 39TH STREET EAST  
 BRADENTON FL 34203**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	ENGWILLER, JOHN D., SR.	5627 39TH STREET EAST	BRADENTON FL 34203	<input type="checkbox"/>
S	ENGWILLER, BEVERLY	5627 39TH STREET EAST	BRADENTON FL 34203	<input type="checkbox"/> Delete
BM	ENGWILLER, DAVID	4009 NW 1ST PLACE	DEERFIELD BEACH FL 33442	<input type="checkbox"/> Delete
BM	HAMMETT, BRENDA LEE	2831 NE 10TH TERRACE	POMPANO BEACH FL 33064	<input type="checkbox"/> Delete
BM	ENGWILLER, JOHN D JR	3802 NW 1ST DRIVE	DEERFIELD BEACH FL 33442	<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
BM		255 NW 36TH AVE	Deerfield Bch, FL 33442	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

*John D. Engwiller*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3-2-00**

Date

Daytime Phone #

CR2E034 (9/99)