

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000036767

**FILED**  
**Mar 12, 2012**  
**Secretary of State**

**Entity Name:** BRIGHT PINES COMPANY, LLC

**Current Principal Place of Business:**

2 GROVE ISLE DRIVE 1009  
MIAMI, FL 33133

**New Principal Place of Business:**

2 GROVE ISLE DRIVE  
SUITE 1009  
MIAMI, FL 33133

**Current Mailing Address:**

2 GROVE ISLE DRIVE, #1009  
MIAMI, FL 33133

**New Mailing Address:**

**FEI Number:** 27-0185090      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

MURCIA, MARIA I  
2 GROVE ISLE DR #1009  
MIAMI, FL 33133 US

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

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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** MURCIA FAMILY LIMITED PARTNERSHIP LLLP  
**Address:** 2 GROVE ISLE DRIVE, #1009  
**City-St-Zip:** MIAMI, FL 33133

**Title:** MGR  
**Name:** THE MURCIA GROUP MANAGEMENT CO LLC  
**Address:** 2 GROVE ISLE DR #1009  
**City-St-Zip:** MIAMI, FL 33133

**Title:** MGR  
**Name:** MURCIA, MARIA I  
**Address:** 2 GROVE ISLE DR 31009  
**City-St-Zip:** MIAMI, FL 33133

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** MARIA ISABEL MURCIA

MGR

03/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date