

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000006444

**FILED**  
**Apr 12, 2013**  
**Secretary of State**  
**CC6077197284**

**Entity Name:** CLP BRIGHTON TRS CORP.

**Current Principal Place of Business:**

450 S ORANGE AVE  
ORLANDO, FL 32801

**Current Mailing Address:**

P.O.BOX 4920  
ORLANDO, FL 32802

**FEI Number:** 20-5707040

**Certificate of Status Desired:** No

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

PATTERSON, AMY J  
450 S ORANGE AVE  
ORLANDO, FL 32801 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

**Officer/Director Detail :**

Title DP  
Name MAULDIN, STEPHEN H  
Address 450 S ORANGE AVE  
City-State-Zip: ORLANDO FL 32801

Title SVP  
Name STARR, JOHN F  
Address 450 S ORANGE AVE  
City-State-Zip: ORLANDO FL 32801

Title DSVP  
Name GREER, HOLLY  
Address 450 S ORANGE AVE  
City-State-Zip: ORLANDO FL 32801

Title D  
Name FRIDLINGTON, JOHN L  
Address 68 SO. SERVICE ROAD, SUITE 120  
City-State-Zip: MELVILLE NY 11747

Title D  
Name SEITZ, MICHAEL K  
Address 68 SO. SERVICE ROAD, SUITE 120  
City-State-Zip: MELVILLE NY 11747

Title T  
Name JOHNSON, JOSEPH T  
Address 450 S ORANGE AVE  
City-State-Zip: ORLANDO FL 32801

*I hereby 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 all other like empowered.*

**SIGNATURE: JOSEPH T. JOHNSON**

**TREASURER**

**04/12/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date