

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A09714**

1. Entity Name

BRITTANY OF MICHIGAN, LTD.

Principal Place of Business

**5010 NE WALDO ROAD
GAINESVILLE FL 32609**

Mailing Address

**21411 CIVIC CENTER DR., STE. 306
SOUTHFIELD MI 48076**

APPROVED
AND
FILED

02 MAR 18 AM 11:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY MAY 1, 2002

4. FEI Number

38-2309057

Applied For

Not Applicable

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

**MATHES, BARRY V SR.
5010 NE WALDO ROAD
GAINESVILLE FL 32609**

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.

DATE

9. Capital Contributions
as Shown on record.

\$175,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$175,000.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # **M0100001469**
NAME **RISSMAN INVESTMENT COMPANY, L.L.C.**
STREET ADDRESS **21411 CIVIC CENTER DR. #306**
CITY-ST-ZIP **GAINESVILLE FL 32609**

STREET ADDRESS **21411 CIVIC CENTER DR. #306**
CITY-ST-ZIP **SOUTHFIELD MI 48076**

DOCUMENT # **KORMAN, HARRY B**
NAME **406 W. HILLSBORO BLVD.**
STREET ADDRESS **DEERFIELD BEACH FL 33441**
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT # **DARIN, DENNIS JR. TRUSTEE**
NAME **3504 WALBRI DR.**
STREET ADDRESS **BLOOMFIELD HILLS MI 48304**
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT # **BRAVEMAN, ARTHUR**
NAME **301 YAMOTO ROAD, #3101**
STREET ADDRESS **BOCA RATON FL 33431**
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT # **PARVEN, HOWARD, TRUSTEE**
NAME **995 TIMBERLAKE**
STREET ADDRESS **BLOOMFIELD HILLS MI**
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/14/02
Date

Daytime Phone #

0017875 AT

CR2E003 (9/01)

STAPLE CHECK HERE