

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H34305

1. Entity Name

BRIGHT IMAGE, INC.

FILED
May 07, 2000 8:00 am
Secretary of State

05-07-2000 90013 050 ***158.75

Principal Place of Business

Mailing Address

375 N.E. 3RD ST.
DELRAY BEACH FL 33483

375 N.E. 3RD ST.
DELRAY BEACH FL 33483-4545

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-2484058

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

LITTLE, JAY B
324 CROTON WAY
WEST PALM BEACH FL 33401

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

JAY B. LITTLE

4-26-00

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 DP
NAME LITTLE, JAY B
STREET ADDRESS 324 CROTON WAY
CITY-ST-ZIP WEST PALM BEACH FL 33401 ☐ Delete

TITLE WELDON, GLEN A. ☒ Change ☐ Addition
NAME
STREET ADDRESS 1213 N.E. 5TH ST.
CITY-ST-ZIP POMPANO, FL 33060

TITLE DV ☒ Delete
NAME THOMAS, BRIAN L
STREET ADDRESS 3013 CORMORANT RD
CITY-ST-ZIP DELRAY BCH FL 33444

TITLE D ☐ Change ☒ Addition
NAME LITTLE MARK D.
STREET ADDRESS 1220 N. SWINTON AVE
CITY-ST-ZIP DELRAY BCH, FL 33444

TITLE DT ☒ Delete
NAME MORRISON, DALE F
STREET ADDRESS 3757 LONE PINE RD.
CITY-ST-ZIP DELRAY BEACH FL 33445

TITLE D ☐ Change ☒ Addition
NAME LITTLE JACK W.
STREET ADDRESS 516 SANDPIPER CIR.
CITY-ST-ZIP DELRAY BEACH, FL 33445

TITLE AS ☒ Delete
NAME LITTLE, KIM H
STREET ADDRESS 324 CROTON WAY
CITY-ST-ZIP W PALM BCH FL

TITLE S ☒ Change ☐ Addition
NAME LITTLE KIM J.H.
STREET ADDRESS 324 CROTON WAY
CITY-ST-ZIP WEST PALM BCH, FL 33401

TITLE DS ☒ Delete
NAME WELDON, GLEN A
STREET ADDRESS 1213 N.E. 5TH ST
CITY-ST-ZIP POMPANO FL 33060

TITLE T ☒ Change ☐ Addition
NAME MORRISON, DALE F.
STREET ADDRESS 3757 LONE PINE RD.
CITY-ST-ZIP DELRAY BCH, FL 33445

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ 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:

JAY B. LITTLE

4-26-00

561-852-6698

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)