

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000005275

1. Entity Name

GLENBROOK VENTURES, LLC

FILED

01 APR 30 PM 6:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

3700 S. TAMiami TRAIL, SUITE 230
SARASOTA FL 34239

Mailing Address

3700 S. TAMiami TRAIL, SUITE 230
SARASOTA FL 34239

2. Principal Place of Business

Suite, Apt. #, etc.
SUITE 201

City & State

3. Mailing Address

Suite, Apt. #, etc.
SUITE 201

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1013392

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

HOGREVE, BRADLEY W ESQ.
3700 S. TAMiami TRAIL, SUITE 230
SARASOTA FL 34239

7. Name and Address of New Registered Agent

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

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE NAME
MGRM
2975 DEVELOPMENT CORPORATION
STREET ADDRESS
3700 S. TAMiami TRAIL, SUITE 230
CITY-ST-ZIP
SARASOTA FL 34239

☐ Delete

TITLE NAME
MGRM
FIDELITY PROPERTIES, LTD.
STREET ADDRESS
6685 CRISTINA MARIA DRIVE
CITY-ST-ZIP
ORLANDO FL 32835

☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

10. ADDITIONS/CHANGES

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP
3700 S. TAMiami TRAIL, SUITE 201

☒ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP
900004217679--3

☐ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP
05/15/01-01891-009
*****50.00 *****50.00

☐ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

11. 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 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.

2975 DEVELOPMENT CORP, MANAGING MEMBER

SIGNATURE: Angus Curtis, Pres.

26 APR 2001 9413629377

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (11/00)