

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2002 8:00 am
Secretary of State

0012020

DOCUMENT # L00000008121

1. Entity Name

LIGHTHOUSE POINT HOLDINGS, LLC

04-09-2002 90047 050 ****50.00

Principal Place of Business

**19024 N.E. 29TH AVENUE
 AVENTURA FL 33180**

Mailing Address

**19024 N.E. 29TH AVENUE
 AVENTURA FL 33180**

2. Principal Place of Business

**1666 Kennedy Causeway
 Suite, Apt. #, etc.
 #610**

3. Mailing Address

**1666 Kennedy Causeway
 Suite, Apt. #, etc.
 #610**



DO NOT WRITE IN THIS SPACE

City & State

North Bay Village

City & State

North Bay Village, FL

4. FEI Number

APPLIED FOR

Applied For

Not Applicable

Zip

33141

Country

Zip

33141

Country

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**SIMS, BAMBI
 19024 N.E. 29TH AVENUE
 AVENTURA FL 33180**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

1666 Kennedy Causeway #610

City

North Bay Village

FL

Zip Code

33005

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

Bambi Sims

Bambi Sims

3/30/02

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
 Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

TITLE **MGR** ☐ Delete
 NAME **THE STONE PROPERTIES, INC.**
 STREET ADDRESS **19024 N.E. 29TH AVENUE**
 CITY-ST-ZIP **AVENTURA FL 33180**

10. ADDITIONS/CHANGES

TITLE ☒ Change ☐ Addition
 NAME **1666 Kennedy Causeway #610**
 STREET ADDRESS **North Bay Village, FL 33141**
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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.

SIGNATURE:

Bambi Sims

3/30/02

305 868-5881

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

Date

Daytime Phone #

CR2E083 (9/01)