

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000009562

1. Entity Name
BROADHURST DEVELOPERS, LLC

FILED

01 JUN 13 AM 10:57

Principal Place of Business
804 ELDORADO AVENUE
CLEARWATER FL 33767

Mailing Address
P.O. BOX 3156
CLEARWATER FL 33767

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

605 S. BROAD ST.
Suite, Apt. #, etc.

3. Mailing Address

605 S. BROAD ST.
Suite, Apt. #, etc.

City & State

BROOKSVILLE, FL

City & State

BROOKSVILLE, FL

4. FEI Number

31-438-6705

Applied For

Not Applicable

Zip
34601

Country

Zip
34601

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

HUNTER, VAN A
804 ELDORADO AVENUE
CLEARWATER FL 33767

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

300004423513--0
-06/18/01--01012--014
****150.00 *****50.00

9. MANAGING MEMBERS / MEMBERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO
DAVID GILLILAND
2143 INDIGO DRIVE
CLEARWATER, FL 33763 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO
VAN HUNTER
804 ELDORADO AVE
CLEARWATER, FL 33767 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V.P. MARKETING
CINAT ZBYTUNLU
804 ELDORADO AVE
CLEARWATER, FL 33767 ☐ 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
☐ Change ☐ Addition

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

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☐ 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.

SIGNATURE: Van A Hunter VAN A HUNTER 5/11/01 (727) 466-0191

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

Date

Daytime Phone #

CR2E083 (11/00)

0018960 AF