



2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2004 8:00 am
Secretary of State

04-23-2004 90013 033 ****50.00

DOCUMENT # L01000000712						
1. Entity Name BRIGHTON AT WELLINGTON, L.C.						
Principal Place of Business 12534 WILES ROAD CORAL SPRINGS, FL 33076			Mailing Address 12534 WILES ROAD CORAL SPRINGS, FL 33076			
2. Principal Place of Business 825 Coral Ridge Drive		3. Mailing Address 825 Coral Ridge Drive				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				
City & State Coral Springs, FL		City & State Coral Springs, FL				
Zip 33071		Zip 33071		Country		
4. FEI Number 65-1139447				Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required		
6. Name and Address of Current Registered Agent ROTHENBERG, LARRY A ESQUIRE 900 NORTH FEDERAL HIGHWAY, SUITE 460 BOCA RATON, FL 33432			7. Name and Address of New Registered Agent			
(Signature of Registered Agent)			Name			
			Street Address (P.O. Box Number is Not Acceptable) 815 Coral Ridge Dr			
			City Coral Springs			
State FL			Zip Code 33071			
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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>						
Filing Fee is \$50.00 Due by May 1, 2004			Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PERRY, CRAIG 12534 WILES ROAD CORAL SPRINGS, FL 33076		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	825 Coral Ridge Drive Coral Springs, FL 33071	
825 Coral Ridge Drive Coral Springs, FL 33071		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		825 Coral Ridge Drive Coral Springs, FL 33071		
825 Coral Ridge Drive Coral Springs, FL 33071		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition				
825 Coral Ridge Drive Coral Springs, FL 33071		<input type="checkbox"/> Change <input type="checkbox"/> Addition				
825 Coral Ridge Drive Coral Springs, FL 33071		<input type="checkbox"/> Change <input type="checkbox"/> Addition				
825 Coral Ridge Drive Coral Springs, FL 33071		<input type="checkbox"/> Change <input type="checkbox"/> Addition		825 Coral Ridge Drive Coral Springs, FL 33071		
825 Coral Ridge Drive Coral Springs, FL 33071		<input type="checkbox"/> Change <input type="checkbox"/> Addition		825 Coral Ridge Drive Coral Springs, FL 33071		
825 Coral Ridge Drive Coral Springs, FL 33071		<input type="checkbox"/> Change <input type="checkbox"/> Addition		825 Coral Ridge Drive Coral Springs, FL 33071		
825 Coral Ridge Drive Coral Springs, FL 33071		<input type="checkbox"/> Change <input type="checkbox"/> Addition		825 Coral Ridge Drive Coral Springs, FL 33071		
825 Coral Ridge Drive Coral Springs, FL 33071		<input type="checkbox"/> Change <input type="checkbox"/> Addition		825 Coral Ridge Drive Coral Springs, FL 33071		
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: _____ APR 21 2004						
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE						
Date						
Daytime Phone #						