

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000001347

1. Entity Name

BRISTOL HOUSE, LLC

**FILED**  
**Sep 12, 2002 8:00 am**  
**Secretary of State**

09-12-2002 90089 015 \*\*\*\*50.00

Principal Place of Business

Mailing Address

C/O PIPER MARBURY RUDNICK & WOLFE  
 203 N. LASALLE ST., STE. 1800  
 CHICAGO IL 60601

C/O PIPER MARBURY RUDNICK & WOLFE  
 203 N. LASALLE ST., STE. 1800  
 CHICAGO IL 60601

2. Principal Place of Business

C/O CF Properties Corp.  
 930 Washington Avenue  
 Suite, Apt. #, etc.  
 4th Floor

3. Mailing Address

C/O CF Properties Corp.  
 930 Washington Avenue  
 Suite, Apt. #, etc.  
 4th Floor

City & State

Miami Beach, Florida

City & State

Miami Beach, Florida

4. FEI Number

04-3611498

Applied For

Not Applicable

Zip

33139-5084

Country

USA

Zip

33139-5084

Country

USA

5. Certificate of Status Desired ☐

**\$5.00** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEXIS DOCUMENT SERVICES INC.  
 3953 WW KELLEY RD.  
 TALLAHASSEE FL 32311

Name

CF Properties Corp.

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

930 Washington Avenue, 4th Floor

City

Miami Beach

FL

Zip Code

33139-5084

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

Signature, typed or printed name of registered agent and time if applicable.

(NOTE: Registered Agent signature required when reinstating)

9/4/02

DATE

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Department of State**  
**Due By September 25, 2002**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 Managing Member  
 Michael D. Friedman  
 930 Washington Avenue, 4th Floor  
 Miami Beach, FL 33139-5084

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

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 Managing Member  
 John Heuberger  
 203 N. LaSalle Street, Ste. 1800  
 Chicago, IL 60601

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

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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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:

**SIGNATURE REQUIRED**

9/4/02

(305) 674-7300

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

Date

Daytime Phone #

CR2E083 (4/02)