

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 01, 2002 8:00 am**  
**Secretary of State**

05-01-2002 91463 044 \*\*\*\*50.00

**DOCUMENT # L01000003870**

1. Entity Name

**WELLINGTON ACQUISITION IV, LLC**

Principal Place of Business

**4400 WEST SAMPLE ROAD  
 SUITE 200  
 COCONUT CREEK FL 33073**

Mailing Address

**4400 WEST SAMPLE ROAD  
 SUITE 200  
 COCONUT CREEK FL 33073**

2. Principal Place of Business

**4500 PGA Blvd.**

3. Mailing Address

**4500 PGA Blvd.**

Suite, Apt. #, etc.

**Suite 207**

Suite, Apt. #, etc.

**Suite 207**

City & State

**Palm Beach Gardens, FL**

City & State

**Palm Beach Gardens, FL**

4. FEI Number

**65-1091299**

Applied For

Not Applicable

Zip  
**33418**

Country  
**USA**

Zip

**33418**

Country  
**USA**

5. Certificate of Status Desired ☐

**\$5.00 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

**SOMERSTEIN, BARRY E ESQ  
 200 EAST BROWARD BLVD.  
 15TH FLOOR  
 FT. LAUDERDALE FL 33301**

7. Name and Address of New Registered Agent

Name

**Phillip Brandt**

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

**4500 PGA Blvd.**

**Suite 207**

City

**Palm Beach Gardens**

**FL**

Zip Code

**33418**

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.

**Phillip Brandt**

(NOTE: Registered Agent signature required when reinstating)

**4/19/02**

DATE

**FILE NOW!!! FEE IS \$50.00  
 Make Check Payable to Department of State  
 Due By May 1, 2002**

9. MANAGING MEMBERS / MANAGERS

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

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  
**MGRM  
 DiVosta Perp. Tr. Holdings, Ltd.  
 4500 PGA Blvd., Suite 207  
 Palm Beach Gardens, FL 33418**

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

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.

**SIGNATURE:**

**SIGNATURE REQUIRED**

**4/19/02**

**561/691-9050**

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

Date Daytime Phone #

CR2E083 (9/01)

0030819