

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L94000000436

1. Entity Name

BRITTANY OF ROSEMONT DEVELOPMENT COMPANY, L.C.

Principal Place of Business

364 WILMINGTON WEST CHESTER PIKE  
GLEN MILLS PA 19342

Mailing Address

364 WILMINGTON WEST CHESTER PIKE  
GLEN MILLS PA 19342

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

BALLETTA, JAMES  
215 NORTH EOLA DRIVE  
ORLANDO FL 32801

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

900004335099--1  
-05/31/01--01005--017  
\*\*\*\*\*50.00 \*\*\*\*\*50.00

9. MANAGING MEMBERS/MEMBERS

TITLE MGR  
NAME SPANO, THOMAS V  
STREET ADDRESS 223 WILMINGTON WEST CHESTER PIKE  
CITY-ST-ZIP CHADDS FORD PA 19317

TITLE MEM  
NAME SPANO, THOMAS V  
STREET ADDRESS 223 WILMINGTON WEST CHESTER PIKE  
CITY-ST-ZIP CHADDS FORD PA 19317

TITLE MEM  
NAME SPANO, BETSY  
STREET ADDRESS 223 WILMINGTON WEST CHESTER PIKE  
CITY-ST-ZIP CHADDS FORD PA 19317

TITLE MEM  
NAME BRITTANY OF ROSEMONT MANAGEMENT CO., INC.  
STREET ADDRESS 223 WILMINGTON WEST CHESTER PIKE  
CITY-ST-ZIP CHADDS FORD PA 19317

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS 364 WILMINGTON WEST CHESTER PIKE  
CITY-ST-ZIP GLEN MILLS PA 19342

TITLE  
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NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
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.

BRITTANY OF ROSEMONT MANAGEMENT CO., INC. A FLORIDA CORPORATION, MEMBER

SIGNATURE:

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

FRANK X. PHILLIPS, VICE PRESIDENT

4/26/01

Date

Daytime Phone #



DO NOT WRITE IN THIS SPACE

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

002071 AF

CR2E083 (11/00)