

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 05, 2002 8:00 am**  
**Secretary of State**

0013391

**DOCUMENT # L95000000015**

1. Entity Name

**STONEBRIDGE, L.C.**

03-05-2002 90018 033 \*\*\*\*\*50.00

Principal Place of Business

**2921 STIRLING RD.  
 FT. LAUDERDALE FL 33312**

Mailing Address

**2921 STIRLING RD.  
 FT. LAUDERDALE FL 33312**

2. Principal Place of Business

**1815 Griffin Road**

3. Mailing Address

**1815 Griffin Road**

Suite, Apt. #, etc.

**Suite 200**

Suite, Apt. #, etc.

**Suite 200**

City & State

**Dania, FL 33004**

City & State

**Dania, FL**

Zip

Country

**33004**

Zip

**33004**

Country

4. FEI Number

**65-0544211**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

**MARKS, JEFFREY N  
 2921 STIRLING RD.  
 FT. LAUDERDALE FL 33312**

7. Name and Address of New Registered Agent

Name

**Jeffrey N. Marks**

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

**1815 Griffin Road**

**Suite 200**

City

**Dania**

**FL**

Zip Code

**33004**

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

**Jeffrey Marks**

**2/15/02**

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  
 Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

TITLE **MGRM** ☐ Delete  
 NAME **MARKS, JEFFREY N**  
 STREET ADDRESS **2921 STIRLING RD.**  
 CITY-ST-ZIP **FT. LAUDERDALE FL 33312**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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TITLE ☐ Delete  
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 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE **MGRM** ☒ Change ☐ Addition  
 NAME **Marks, Jeffrey N.**  
 STREET ADDRESS **1815 Griffin Road, Suite 200**  
 CITY-ST-ZIP **Dania, FL 33004**

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

TITLE ☐ Change ☐ Addition  
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 STREET ADDRESS  
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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:**

**Jeffrey N. Marks**

**2/15/02**

**954-342-8484**

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

Date

Daytime Phone #

CR2E083 (9/01)