

# 2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

DOCUMENT # L99000003152

1. Entity Name  
BRIGHTSTONE DEVELOPMENT GROUP, LLC

00 APR -3 AM 10:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

13579 WEYBURN DRIVE  
DELRAY BEACH FL 33446

Mailing Address

13579 WEYBURN DRIVE  
DELRAY BEACH FL 33446-3649

★ address change only ★



2. Principal Place of Business

3840 max Place

3. Mailing Address

3840 max Place

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Boynton Beach FL

City & State

Boynton Beach FL

4. FEI Number

05-0924516

Applied For

Not Applicable

Zip

33436

Country

US

Zip

33436

Country

US

5. Certificate of Status Desired

✓

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LITTELL, LANCE

13579 WEYBURN DRIVE  
DELRAY BEACH FL 33446

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

(NOTE: Registered Agent signature required when reinstating)

3/30/00

DATE

FILE NOW!!! FEE IS \$50.00  
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE MGRM  
NAME LITTELL, LANCE  
STREET ADDRESS 13579 WEYBURN DRIVE  
CITY-ST-ZIP DELRAY BEACH FL 33446  
address change only →

TITLE MGRM  
NAME STEVENS, RANDOLPH MOORE  
STREET ADDRESS 13579 WEYBURN DRIVE  
CITY-ST-ZIP DELRAY BEACH FL 33446  
address change only →

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE  
NAME 3840 max Place #206  
STREET ADDRESS Boynton Beach, FL 33436  
CITY-ST-ZIP  
Change Addition

TITLE  
NAME 3840 max Place #206  
STREET ADDRESS Boynton Beach, FL 33436  
CITY-ST-ZIP  
Change Addition

TITLE  
NAME 700003217467  
STREET ADDRESS -04/20/00--01106--001  
CITY-ST-ZIP \*\*\*\*\*55.00 \*\*\*\*\*55.00  
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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Lance

3/30/00

Date

Daytime Phone #

CR2E083 (9/99)