

Jan 04 05 03:30p

Richard Daar

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Jan 12, 2005 8:00 am
Secretary of State

01-12-2005 90013 019 ***150.00

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000055428

1. Entity Name

WATERMAN - BRIGHTON, INC.



Principal Place of Business

 2000 N OCEAN BLVD
 #601
 BOCA RATON, FL 33431 US

Mailing Address

 C/O RICHARD A. DAAR, ESQ.
 1400 S. TREASURE DR.
 NORTH BAY VILLAGE, FL 33141 US

40000681



01042005

No Chg-P

CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0808438

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

 DAAR, RICHARD A
 1400 S. TREASURE DR.
 NORTH BAY VILLAGE, FL 33141
DO NOT WRITE
IN THIS SPACE

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 title if applicable (NOTE: Registered Agent signature required when reappointing)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

 9. Election Campaign Financing
 Trust Fund Contribution. ☐
\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	POST
NAME	WATERMAN, HAROLD L
STREET ADDRESS	800 WEST AVE SUITE 601 1400 S. TREASURE DR.
CITY-ST-ZIP	MIAMI, FL 33139 North Bay Village FL 33141
TITLE	D
NAME	WATERMAN, BERYL
STREET ADDRESS	800 WEST AVE SUITE 601 1400 S. TREASURE DR.
CITY-ST-ZIP	MIAMI, FL 33139 North Bay Village FL 33141
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

H.L. WATERMAN, P/D

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-05-05