

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000001516

Entity Name: VIRTUAL PROPERTIES, INC.

FILED
Mar 26, 2010
Secretary of State

Current Principal Place of Business:

2979 TRIVERTON PIKE DRIVE, SUITE 100
MADISON, WI 537117505 US

New Principal Place of Business:

Current Mailing Address:

2979 TRIVERTON PIKE DRIVE, SUITE 100
MADISON, WI 537117505 US

New Mailing Address:

FEI Number: 39-1830320

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD
Name: ZELLMER, NANCY S
Address: 2979 TRIVERTON PIKE DRIVE, SUITE 100
City-St-Zip: MADISON, WI 537117505

Title: VD
Name: STATHAS, JANET L
Address: 2979 TRIVERTON PIKE DRIVE, SUITE 100
City-St-Zip: MADISON, WI 537117505

Title: STD
Name: STATHAS, JOHN C
Address: 2979 TRIVERTON PIKE DRIVE, SUITE 100
City-St-Zip: MADISON, WI 537117505

Title: VD
Name: ZELLMER, JAMES E
Address: 2979 TRIVERTON PIKE DRIVE, SUITE 100
City-St-Zip: MADISON, WI 537117505

Title: VD
Name: ROSENBLUM, STEVEN H
Address: 2979 TRIVERTON PIKE DRIVE, SUITE 100
City-St-Zip: MADISON, WI 537117505

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JOHN C STATHAS

ST

03/26/2010

Electronic Signature of Signing Officer or Director

_____ Date