## 2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # F95000006004 1. Entity Name THE V FOUNDATION, INC. Principal Place of Business Mailing Address 1201 WALNUT STREET 1201 WALNUT STREET 2ND FLOOR 2ND FLOOR **CARY NC 27511 CARY NC 27511** 2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Zip Country Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) C T CORPORATION SYSTEM 1201 HAYS STREET TALLAHASSEE FL 32301 Zip Code FL 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) FILE NOW: 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Department of State Trust Fund Contribution. Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. CEO ☐ Change ☐ Addition TITLE ☐ Delete TITLE VALVANO, NICHOLAS NAME NAME STREET ADDRESS 1201 WALNUT ST. STREET ADDRESS CITY-ST-ZIP **CARY NC 27511** CITY-ST-ZIP Change CEO CHAIRMAN ☐ Delete TITLE ☐ Addition TITLE LLOYD, Robert & LLOYD, ROBERT E NAME STREET ADDRESS 26707 TANGLEWOOD LANG STREET ADDRESS 88 ROWLAND WAY CITY-ST-ZIP CITY-ST-ZIP NOVATO CA 94945 LOS AITOS HILLS, CA 94022 Change TITLE DIRECTOR Addition TITLE ☐ Delete Steve Bornstein BORNSTEIN, STEVEN M NAME NAME STREET ADDRESS 5141 LAMKERSHIM BLUD STREET ADDRESS 605 THIRD AVENUE CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY 10158** NORTH HOLLY WOOD, CA 9/60/ ☐ Change ☐ Addition TITE F ☐ Delete TITLE RHOADS, HARRY JR NAME NAME STREET ADDRESS 310 S HENRY ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **ALEXANDRIA VA 22314** ☐ Addition TITI F ☐ Delete TITLE Change NAME BAST, ROBERT C JR NAME STREET ADDRESS STREET ADDRESS 1515 HOLCOMBE BLVD, BOX 92 CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77030** ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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 617, 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

VANO CEU 1/9/01 914 380 9505