

2001 UNIFORM BUSINESS REPORT (UBR)

0021929 AF

DOCUMENT # L97000001007

1. Entity Name
VELAND L.C.

FILED

01 MAR 12 AM 9:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

| | |
|--|--|
| Principal Place of Business 2106 BISPHAM ROAD, SUITE B SARASOTA FL 34231 | Mailing Address 2106 BISPHAM ROAD, SUITE B SARASOTA FL 34231 |
|--|--|



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number **65-0807495** Applied For
Not Applicable

Zip Country Zip Country 5. Certificate of Status Desired **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PATTERSON, JOHN
46 NORTH WASHINGTON BOULEVARD, SUITE 1
SARASOTA FL 34231**

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) DATE _____

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

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP |
|---------------------------------|-------------|---------------------------------|---|---|---------------------|------------------------------|------------------------------|
| <input type="checkbox"/> Delete | MGRM | 1071606 ONTARIO INC. | 253 ROBINA ROAD ANCASTER, ONTARIO, CANADA | <input type="checkbox"/> Change <input type="checkbox"/> Addition | | | |
| <input type="checkbox"/> Delete | MGRM | BALSALM L. CORPORATION | 95 ST. CLAIR AVENUE W., #1605 TORONTO, ONTARIO, CANADA | <input type="checkbox"/> Change <input type="checkbox"/> Addition | | | |
| <input type="checkbox"/> Delete | MGRM | RAWEC HOLDINGS LIMITED | 5500 DIXIE ROAD, BOX E MISSISSAUGA, ONT., CANADA | <input type="checkbox"/> Change <input type="checkbox"/> Addition | 10000385382d | -03/15/01--01047--007 | *****50.00 *****50.00 |
| <input type="checkbox"/> Delete | MGRM | SANVIN, INC. | 46 NO. WASHINGTON BLVD., #1 SARASOTA FL 34236 | <input type="checkbox"/> Change <input type="checkbox"/> Addition | | | |
| <input type="checkbox"/> Delete | MGRM | SACKVILLE HOLDINGS, INC. | ONE FIRST CANADIAN PLACE, #5600 TORONTO, ONTARIO, CANADA | <input type="checkbox"/> Change <input type="checkbox"/> Addition | | | |
| <input type="checkbox"/> Delete | MGRM | K.G.C. LTD. | 8 KING STREET E., #1400 TORONTO, ONT., CANADA | <input type="checkbox"/> Change <input type="checkbox"/> 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 REQUIRED** Date _____ Daytime Phone # _____

CR2E083 (11/00)