

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M01000000493

1. Entity Name

WHITNEY, BAILEY, COX & MAGNANI, LLC

Principal Place of Business

849 FAIRMOUNT AVE.
TOWSON MD 21286

Mailing Address

849 FAIRMOUNT AVE.
TOWSON MD 21286

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 52-1081866

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
PRESIDENT DAVID G. MORGAN 849 FAIRMOUNT AVE BALTIMORE MD 21286	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
EXECUTIVE VP DOUGLAS SUESS 849 FAIRMOUNT AVE BALTIMORE MD 21286	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
EXECUTIVE VP RICHARD MAGNANI 849 FAIRMOUNT AVE BALTIMORE MD 21286	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
EXECUTIVE VP PHILIP PER 849 FAIRMOUNT AVE BALTIMORE MD 21286	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
EXECUTIVE VP W. PRESTON DAVIS 849 FAIRMOUNT AVE BALTIMORE MD 21286	
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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

1/4/02 410-512-4500

FILED
Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90236 017 ****55.00



DO NOT WRITE IN THIS SPACE