2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

Lange &

FILED May 25, 2004 8:00 am Secretary of State

1. Entity Nam	MENT # M03000 CHWOOD 9, LLC		-	04-28-20	04 90062 013 *	***50.00		
Principal Place of Business 701 EAST BYRD STREET, 15TH FLOOR		Mailing Address 701 EAST BYRD STRE	Mailing Address 701 EAST BYRD STREET, 15TH FLOOR					\
RICHMOND, V		RICHMOND, VA 2321			F 10 10 17 10 11	14 CENTR (III) 14 CENTR NO.	ir filik upan nidi min mul	
2. Principal P	lace of Business	3. Mailing Address	3. Mailing Address					
Suite, Apt. #, etc.		Sulte, Apt. #, etc.			02042004		CR2E083 (10/03	<u> </u>
City & State		City & State	City & State		4. FEI Numi	ber	 	Applied For Not Applicable
Zip	Country	Zip	Coun			e of Status Desired	S5.00 A	red
6. Name and Address of Current Registered Agent				Name	7. Name an	d Address of New F	Registered Agent / :	
LEXISNEXIS DOCUMENT SOLUTIONS, INC. 1201 HAYS STREET				Street Address	(P.O. Box Num	ber is Not Acceptable	e) ÷ ·	.=
TALLAHASSEE, FL 32301-2525							-	
	,-		•	City		·	FL Zip Co	ode
8. The above the obligat	named entity submits this state ions of registered agent.	ment for the purpose of changing it	s register	ed office or registe	red agent, or b	oth, in the State of Fi	orlda. I am famillar wit	h, and accept
SIGNATURE.	Signature, typed or printed name of register	ed spert and the it spokeship (NC)	TF: Bardstara	d Agent signesure require	ri when esinchtina		DATE	
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, FI	ling Fee is \$50.00 ue by May 1, 2004				•		e check payable to a Department of St	
9.		MEMBERS/MANAGERS	10.		· · ·	ADDITIONS	/CHANGES	
TITLE	MGRM A.P. & S.M. MORREALE 1	988 REV. LVNG. TRUST	TITL NAM				Change	Addition
STREET ADDRESS CITY-ST-ZIP	1764 COTTONWOOD DRI VISTA, CA 92081			EET ADDRESS '-ST-ZIP				
TITLE NAME	•	☐ Deleta	TITL NAM				☐ Change	: Addition
STREET ADDRESS CITY-ST-ZIP			STRE	EET ADDRESS - ST-ZIP				
TITLE NAME		☐ Delete	וזמ	E			Change	Addition
STREET ADDRESS CITY-ST-ZIP			STRE	EET ADDRESS -SI-ZIP				
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TITLE		☐ Delete	пп				☐ Change	Addition
STREET ADDRESS				EET ADDRESS -ST-ZIP				
TITLE	<u> </u>	☐ Delete	רנות				☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP	·	·	a :	E Eet adoress (-St-Zip	•			
11. I hereby of	bility company or the receiver or	led with this filing does not qualify fo ate and that my signature shall have r trustee empowered to execute this	or the exe	motion stated in Se	nade under cal	ih: fhat I am a mana	I further certify that the ging member or mana	information ger of the
ļ	anthony	P. Morresle				4 2		
SIGNATURE: ANTHONY P. MORREAUF 03/18/04 760-643-2312								