

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

00304115 AB

DOCUMENT # B97000000109

1. Entity Name

PRESIDENTIAL PROPERTIES GROUP, LTD.

00 APR -3 AM 11:43

ng 4/13

Principal Place of Business
ATTN: MICHAEL JONES. ESQ.
6601 WEST BROAD ST. . P.O. BOX 27003
RICHMOND VA 23261

Mailing Address
ATTN: MICHAEL JONES. ESQ.
6601 WEST BROAD ST. . P.O. BOX 27003
RICHMOND VA 23261-7003

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number	54-1827776	Applied For	Not Applicable
5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CORPORATION SERVICE COMPANY ATTN: LAURA DUNLAP 1201 HAYS STREET TALLAHASSEE FL 32301		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
9. Capital Contributions as Shown on record.	\$4,900.00	10. Amount of Capital Contributions in FLORIDA to date.
11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION		

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	857373	STREET ADDRESS	
NAME	REYNOLDS METALS DEVELOPMENT COMPANY	CITY - ST - ZIP	000003214620--1
STREET ADDRESS	6601 WEST BROAD STREET		
CITY - ST - ZIP	RICHMOND VA 23261		
DOCUMENT #	F94000004682	STREET ADDRESS	
NAME	PROPERTY ADVISORY GROUP, INC.	CITY - ST - ZIP	
STREET ADDRESS	4 CATHEDRAL SQUARE		
CITY - ST - ZIP	PROVIDENCE RI 02903		
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
CITY - ST - ZIP			
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STREET ADDRESS			
CITY - ST - ZIP			

14. 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:	SIGNATURE REQUIRED	3/29/00	804 281-3251
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		Date	Daytime Phone #

CR2E003 (9/99)