

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000006124

1. Entity Name

KINGSBERRY KGA, INC.

FILED
Jul 02, 2002 8:00 am
Secretary of State

05-19-2002 90172 040 ***150.00

96288



DO NOT WRITE IN THIS SPACE

Principal Place of Business
555 EAST MAIN STREET, 17TH FL
NORFOLK VA 23510

Mailing Address
555 EAST MAIN STREET, 17TH FL
NORFOLK VA 23510

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 54-1643560
Applied For
Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired ☐ \$8.75 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: C.T. Corporation System
Street Address (P.O. Box Number is Not Acceptable):
1200 South Pine Island Road
City: Plantation FL Zip Code: 33324

8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.

SIGNATURE: *[Signature]* Anusha Putty
Vice President and Assistant Secretary
DATE: 6/13/02

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PCD SLONE, JORDAN E 555 EAST MAIN STREET, 17TH FL NORFOLK VA	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	VD BANGEL, HERBERT K 505 COURT STREET PORTSMOUTH VA	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	STD CHILDERS, E R 555 EAST MAIN STREET, 17TH FL NORFOLK VA	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* 4-4-2002 (757) 640-0800

CR2E034 (9/01)

Attachment

96298 3:53 PM

5/30/02 CORPORATE DETAIL RECORD SCREEN
NUM: F96000006124 ST:VA ACTIVE/FOREIGN PROF FLD: 11/22/1996
FEI#: 54-1643560
NAME : KINGSBERRY KGA, INC.
CROSS REF: KGA, INC.
PRINCIPAL: 555 EAST MAIN STREET, 17TH FL
ADDRESS NORFOLK, VA 23510
RA NAME : C T CORPORATION SYSTEM
RA ADDR : 1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US
ANN REP : (1999) A 04/21/99 (2000) A 04/17/00

#F96000006124

RESIGNED: 03/29/02
(2001) A 04/26/01

1. MENU, 3. OFFICERS

ENTER SELECTION AND CR: