

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000006224

1. Entity Name
AAC FUNDING II, INC.

Principal Place of Business
10 SOUTH SIXTH STREET
RICHMOND VA 23219

Mailing Address
10 SOUTH SIXTH STREET
RICHMOND VA 23219

2. Principal Place of Business
400 EAST CARY STREET

3. Mailing Address
400 EAST CARY STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
RICHMOND, VA

City & State
RICHMOND, VA

4. FEI Number 94-3211924

Applied For
Not Applicable

Zip
23219

Country
USA

Zip
23219

Country
USA

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

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

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
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

TITLE PD
NAME SURFACE, KATHERYN E
STREET ADDRESS 10 SOUTH SIXTH STREET
CITY-ST-ZIP RICHMOND VA 23219 ☐ Delete

TITLE VSD
NAME WALLACE, D. FLEET
STREET ADDRESS 10 SOUTH SIXTH STREET
CITY-ST-ZIP RICHMOND VA 23219 ☒ 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE SD
NAME SURFACE, KATHERYN E.
STREET ADDRESS 400 EAST CARY STREET
CITY-ST-ZIP RICHMOND, VA 23219 ☒ Change ☐ Addition

TITLE PD
NAME WALLIS, W. MARK
STREET ADDRESS 400 EAST CARY STREET
CITY-ST-ZIP RICHMOND, VA 23219 ☐ Change ☒ Addition

TITLE VPD
NAME GENRY, CHRISTOPHER D.
STREET ADDRESS 400 EAST CARY STREET
CITY-ST-ZIP RICHMOND, VA 23219 ☐ Change ☒ Addition

TITLE VPD
NAME SHANABERGER, SCOTT A.
STREET ADDRESS 400 EAST CARY STREET
CITY-ST-ZIP RICHMOND, VA 23219 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

KATHERYN E. SURFACE, Secretary 7/31/01 804-780-2691

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Aug 31, 2001 8:00 am
Secretary of State

08-31-2001 90238 020 ***550.00



DO NOT WRITE IN THIS SPACE

0138082 AT

CR2E034 (5/01)