

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2007 8:00 am
Secretary of State

05-03-2007 90035 016 ***150.00

DOCUMENT # F98000004077 1. Entity Name COLONY MANAGEMENT SERVICES, INC.					
Principal Place of Business 9201 FOREST HILL AVE. STE. 200 RICHMOND, VA 23235			Mailing Address 9201 FOREST HILL AVE. STE. 200 RICHMOND, VA 23235		
2. Principal Place of Business - No P.O. Box # 8720 Stony Point Pkwy. Suite, Apt. #, etc. Suite 300		3. Mailing Address ← Same Suite, Apt. #, etc.			
City & State Richmond VA		City & State			
Zip 23235	Country USA	Zip	Country	4. FEI Number 56-1737802	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 2731 EXECUTIVE PARK DR SUITE 4 WESTIN, FL 33331			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. I am familiar with, and accept the obligations of registered agent. 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 \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PK PIKINGTON, DALE H 9201 FOREST HILL AVE STE200 RICHMOND, VA 23235		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC W. Douglas Griffin 8720 Stony Point Pkwy., Suite 300 Richmond, VA 23235	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WATSON, MARK E III 10101 REUNION PLACE, STE 500 SAN ANTONIO, TX 78216		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CRAIG S. COMEAUX 10101 Reunion Place, STE 500 San Antonio, TX 78216	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HAUSHILL, MARK W 10101 REUNION PLACE, STE 500 SAN ANTONIO, TX 78216		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Dale Pilkington 8720 Stony Point Pkwy., Suite 300 Richmond, VA 23235	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS LEFLORE, BYRON L JR 10101 REUNION PLACE, STE 500 SAN ANTONIO, TX 78216		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change ☐ Addition ☐	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KIMPFLE, GAIL 9201 FOREST HILL AVE STE 100 RICHMOND, VA 23235		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Gail Kimpfeler 8720 Stony Point Pkwy., Suite 300 Richmond, VA 23235	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FRAZIER, C. SCOTT 9201 FOREST HILL AVE, STE 200 RICHMOND, VA 23235		TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP Scott Frazier 8720 Stony Point Pkwy., Suite 300 Richmond, VA 23235	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 person or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered					
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date: 30 April 2007 Daytime Phone: 804 560 2958		