FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE

APPROVED

DOCUMENT # J96700 (6)

1. Corporation Name

THE GARDENS THIS END UP, INC.

Principal Place of Business	Mailing Address
1309 EXCHANGE ALLEY RICHMOND VA 23219	1309 EXCHANGE ALLEY RICHMOND VA 23219

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/12/1987
3a. Date of Last Report: 05/01/1994
4. FEI Number: 54-1436081 — Applied For / Not Applicable

2. Principal Place of Business 21 / Suite, Apt. # etc. 22 / City & State 23 / Zip 24 / Country 25

2a. Mailing Address 26 / Suite, Apt. # etc. 27 / City & State 28 / Zip 29 / Country 30

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. ... Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

UNITED STATES CORPORATION COMPANY
1201 HAYES ST
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	TITLE	☐ Change ☐ Addition
NAME	~~QURAESHI, SHAHID~~	NAME	
STREET ADDRESS	~~ONE THEALL ROAD~~	STREET ADDRESS	
CITY-ST-ZIP	~~RYE NY~~	CITY-ST-ZIP	
TITLE	D	TITLE	☐ Change ☐ Addition
NAME	RICHARDS, ARTHUR V.	NAME	
STREET ADDRESS	ONE THEALL ROAD	STREET ADDRESS	
CITY-ST-ZIP	RYE NY	CITY-ST-ZIP	
TITLE	DP	TITLE	Kemeny, Robert ☑ Change ☐ Addition
NAME	~~MCELHINNEY, DOUGLAS H.~~	NAME	
STREET ADDRESS	1309 EXCHANGE ALLEY	STREET ADDRESS	
CITY-ST-ZIP	RICHMOND VA	CITY-ST-ZIP	
TITLE	V	TITLE	☐ Change ☐ Addition
NAME	THOMAS, JEFFREY L.	NAME	
STREET ADDRESS	1309 EXCHANGE ALLEY	STREET ADDRESS	
CITY-ST-ZIP	RICHMOND VA	CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

14. I the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 a 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] VP — 4/28/95 — 804 644 1249

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0009717 CP