

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000001505

1. Entity Name

KTS VENTURE FUND, L.C.

Principal Place of Business

385 COMMERCE WAY, SUITE 101
LONGWOOD FL 32750

Mailing Address

385 COMMERCE WAY, SUITE 101
LONGWOOD FL 32750

2. Principal Place of Business

485 N. Keller Road

Suite, Apt. #, etc.

Suite 140

City & State

Maitland FL

Zip

32751

Country

USA

3. Mailing Address

485 N. Keller Road

Suite, Apt. #, etc.

Suite 140

City & State

Maitland FL

Zip

32751

Country

USA

4. FEI Number

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

KOOS, WILLIAM

385 COMMERCE WAY, SUITE 101

LONGWOOD FL 32750

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

485 N. Keller Road

Suite 140

City

Maitland

FL

Zip Code

32751

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

William M. Koos Jr.

William M. Koos Jr.

5/4/01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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10. ADDITIONS/CHANGES

TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ Change ☒ Addition

TITLE
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☐ Change ☐ Addition

11. 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

William M. Koos Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

5/4/01

Date

407-260-0564

Daytime Phone #

FILED

2001 MAY-9 PM 4:06

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE