

FILED
Feb 05, 2002 8:00 am
Secretary of State

02-05-2002 90119 012 ****55.00

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L01000021346

1. Entity Name

Vestcor Partners XXIV, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3020 Hartley Road

3. Mailing Address

Suite, Apt. #, etc.

Suite 300

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Jacksonville, FL

City & State

4. FEI Number

59-3759903

Applied For

Not Applicable

Zip

32257

Country

USA

Zip

Country

5. Certificate of Status Desired

☒

\$5.00 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Frick, Stephen A.

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

3020 Hartley Road

Suite 300

City

Jacksonville

FL

Zip Code

32257

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

Stephen A. Frick

1-24-02

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

DATE

FEE IS \$50.00

Make Check Payable to Department of State

DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Road, John D.
3020 Hartley Road, Suite 300
Jacksonville, FL 32257

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VT
Farrell, Mark T.
3020 Hartley Road, Suite 300
Jacksonville, FL 32257

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VS
Frick, Stephen A.
3020 Hartley Road, Suite 300
Jacksonville, FL 32257

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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**DO NOT WRITE
IN THIS SPACE**

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:

Stephen A. Frick

Stephen A. Frick

1-24-02

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

Date

Daytime Phone #

CR2E083B (12/01)