File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY 🔏 FILED SECRETARY OF STATE DIVISION OF CORPORATIONS Katherine Harris ANNUAL REPORT Secretary of State 1999 **DIVISION OF CORPORATIONS** FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE 99 MAR 17 PM 1:50 **DOCUMENT # L95000000249** 1a. Principal Place of Business Address VERO INVESTMENTS, L.C. 10075 SOUTH FEDERAL HIGHWAY #160 10075 SOUTH FEDERAL HIGHWAY PORT ST. LUCIE FL 34952-5614 PORT ST. LUCIE FL 34952 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 03/27/1995 FLSuite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-3310774 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Zip Country Zipi Country 07/27/1998 7. Name and Address of Current Registered Agent B. Name and Address of New Registered Agent/Office BAILY, JAY E 46 N. WASHINGTON, SUITE 13 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34236 Zip Code 9. Pursuant to the provisions of Sections 608 416 and 608 508, Florida Statutes, the above named limited liability company 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 affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations. SIGNATURE ___ DATE (Begistered Agent Accepting Apparatuent) (Not1). Required Agent signaturing and well a naturing 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MULLINS, CHARLES R MGRM 1600 FRONT ST., SUITE 300 RICHLANDS VA MGR TATUM, ROBERT A 2200 FRONT STREET RICHLANDS VA 200000028111152 03/18/99-01096-005 ****188.75 ****188.75 1 I do 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 annual report is true and accurate and that my signature shall have the same legal offect as if made under oath, that I am a managing member or manager of the fighted hability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address

SIGNATURE: