

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000002809

1. Entity Name  
CORO AVENUE ROYALE, LLC

Principal Place of Business Mailing Address  
6900 SOUTHPOINT DRIVE NORTH, SUITE 250 6900 SOUTHPOINT DRIVE NORTH, SUITE 250  
JACKSONVILLE FL 32216 JACKSONVILLE FL 32216

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

6. Name and Address of Current Registered Agent

SANKERS, GUS  
6900 SOUTHPOINT DRIVE NORTH, SUITE 250  
JACKSONVILLE FL 32216

4. FEI Number 59-3580149 Applied For Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

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.

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 \$50.00  
Make Check Payable to Department of State

700004334817--9  
-05/30/01--01089--017  
\*\*\*\*\*50.00 \*\*\*\*\*50.00

9. MANAGING MEMBERS/MEMBERS

TITLE MGR  
NAME FRANSEN, VICTOR R  
STREET ADDRESS 8221 OLD COURTHOUSE ROAD, SUITE 204  
CITY-ST-ZIP VIENNA VA 22182 ☒ Delete

TITLE MGR  
NAME SANKERS, GUS  
STREET ADDRESS 6900 SOUTHPOINT DRIVE NORTH, SUITE 250  
CITY-ST-ZIP JACKSONVILLE FL 32216 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

10. ADDITIONS/CHANGES

TITLE MGR  
NAME CORO INVESTMENTS LLC  
STREET ADDRESS 8221 OLD COURTHOUSE ROAD, SUITE 204  
CITY-ST-ZIP VIENNA, VA 22182 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ 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.

VICTOR R. FRANSEN MANAGER

SIGNATURE  CORO INVESTMENTS LLC 4/26/01 (703) 506-1006

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

Date

Daytime Phone #

00027-88 AF

CR2E083 (11/00)

FILED

2001 APR 27 PM 2:00

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE