

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 24, 2002 8:00 am
Secretary of State

01-24-2002 90114 021 ****50.00

DOCUMENT # M00000000236

1. Entity Name

VIRGINIA PROPERTIES L.L.C.

Principal Place of Business

**603 S. CEDAR LAKE DRIVE
COLUMBIA MO 65203**

Mailing Address

**603 S. CEDAR LAKE DRIVE
COLUMBIA MO 65203**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

43-1847624

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PERKINS, CHRISTINE
% WHITE SANDS PROPERTY MANAGEMENT, INC.
907 KLOSTERMAN RD., EAST
TARPON SPRINGS FL 34689**

Name

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

40 COLDWELL BANKER / Countryside office

2536 Countryside Blvd, Suite 100

City

Clearwater

FL

Zip Code

33763

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
Due By May 1, 2002**

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
KOUKOLA, PETER
603 S. CEDAR LAKE DRIVE
COLUMBIA MO 65203** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
KOUKOLA, CHRISTINE
603 S. CEDAR LAKE DRIVE
COLUMBIA MO 65203** ☐ Delete

TITLE
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CITY - ST - ZIP
☐ Change ☐ Addition

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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.

SIGNATURE:

PETER KOUKOLA

1/14/2002

573 443 2352

CR2E083 (9/01)