2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M00000001231

1. Entity Name

ICS-VILLAGE, L.L.C.

FILED

01 APR -3 PH 3: 57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
100 CENTERVIEW DRIVE. SUITE 200 BIRMINGHAM AL 35216	100 CENTERVIEW DRIVE. SUITE 200 BIRMINGHAM AL 35216

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 63-1252686	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
PANICO, JAMES P ESQ. 111 S. MAITLAND AVE. MAITLAND FL 32751	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

700003992937---0
--04/11/01--01112--014
*****50.00   *****50.00

9. MANAGING MEMBERS / MEMBERS		**10.** ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE *member* NAME J. Frank Barefield, Jr. STREET ADDRESS 100 Centerview Dr, Suite 200 CITY-ST-ZIP Birmingham AL 35216	☐ Change ☑ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E083 (11/00)

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: _Frank Barefield_   3/30/01   2058239101

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #