

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90020 016 ***138.75

DOCUMENT # M08000001687

1. Entity Name

SCHNABEL SOUTH, LLC

7206975-SO FL



Principal Place of Business

1054 TECHNOLOGY PARK DRIVE
GLEN ALLEN VA 23059

Mailing Address

1054 TECHNOLOGY PARK DRIVE
GLEN ALLEN VA 23059



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E083 (10/07)

Zip

Country

Zip

Country

4. FEI Number

81-0582679

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

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Signature: typewritten or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent's signature required when renewing)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008, Fee Will Be \$538.75
Make Check Payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR ☐ Delete
NAME MATHESON, GORDON M
STREET ADDRESS 9144 RIGNEY TERR
CITY-ST-ZIP GLEN ALLEN VA 23060

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

TITLE MGR ☐ Delete
NAME DESTEPHEN, RAYMOND A
STREET ADDRESS 14502 MILL CREEK DR.
CITY-ST-ZIP MONTPELIER VA 23192

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

TITLE MGR ☐ Delete
NAME WIRTH, GEORGE E
STREET ADDRESS 2522 LAWNSIDE ROAD
CITY-ST-ZIP TIMONIUM MD 21093

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

TITLE MGR ☐ Delete
NAME CAMPBELL, DAVID B
STREET ADDRESS 1130 ALEXANDER LANE
CITY-ST-ZIP WEST CHESTER PA 19832

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

TITLE MGR ☒ Delete
NAME CLEMENTS, DAVID A
STREET ADDRESS 12208 HAMPTON VALLEY TURN
CITY-ST-ZIP CHESTERFIELD VA 23832

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

TITLE MGR ☐ Delete
NAME CONNER, STEVEN E
STREET ADDRESS 619 WOODLAND DRIVE
CITY-ST-ZIP BLACKBURG VA 24060

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

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Sum A. Quirgo

15 April 2008

804.264.3222

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

Date

County Phone #