

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M98000001053

1. Entity Name
VA PARCEL, L.L.C.

FILED

01 FEB -6 AM 8:11

Principal Place of Business
6300 SHINGLE CREEK PARKWAY, SUITE 600
MINNEAPOLIS MN 55430-2124

Mailing Address
6300 SHINGLE CREEK PARKWAY, SUITE 600
MINNEAPOLIS MN 55430-2124

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Clb RR Donnelley + Sons Company

Suite, Apt. #, etc.

Suite, Apt. #, etc.

77 W Wacker Dr.

City & State

City & State

Chicago IL 60601

Zip

Country

Zip

Country

60601

USA

4. FEI Number

41-1827015

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE MGR
NAME CLARK, JOHN L
STREET ADDRESS 6300 SHINGLE CREEK PARKWAY, SUITE 600
CITY-ST-ZIP MINNEAPOLIS MN 55430-2124 ☒ Delete

TITLE Chairman + President
NAME John C. Campanelli
STREET ADDRESS 77 W. Wacker Drive
CITY-ST-ZIP Chicago IL 60601 ☐ Change ☒ Addition

TITLE MGR
NAME LOHN, BRUCE F
STREET ADDRESS 6300 SHINGLE CREEK PARKWAY, SUITE 600
CITY-ST-ZIP MINNEAPOLIS MN 55430-2124 ☒ Delete

TITLE Secretary
NAME Monica M. Fohrman
STREET ADDRESS 77 W Wacker Dr.
CITY-ST-ZIP Chicago IL 60601 ☐ Change ☒ Addition

TITLE MGR
NAME O'NEIL, MICHAEL E
STREET ADDRESS 6300 SHINGLE CREEK PARKWAY, SUITE 600
CITY-ST-ZIP MINNEAPOLIS MN 55430-2124 ☐ Delete

TITLE Vice President
NAME 700003705247-2
STREET ADDRESS -02/15/01--01014--002
CITY-ST-ZIP *****50.00 *****50.00 ☒ Change ☐ Addition

TITLE MGR
NAME SATORIOUS, JOHN A
STREET ADDRESS 900 SECOND AVENUE SOUTH, SUITE 1100
CITY-ST-ZIP MINNEAPOLIS MN 55402 ☒ Delete

TITLE Treasurer
NAME Andrea Robertson
STREET ADDRESS 77 W Wacker Drive
CITY-ST-ZIP Chicago IL 60601 ☐ 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

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

[Signature]

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

Date

Daytime Phone #

1/25/01

312/326-7139

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CR2E083 (11/00)