

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M99000000432

1. Entity Name

WINDSONG LIMITED INTERESTS L.L.C.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 JUL 10 AM 9:25

Principal Place of Business

14700 VILLAGE SQUARE PLACE
MIDLOTHIAN VA 23112

Mailing Address

14700 VILLAGE SQUARE PLACE
MIDLOTHIAN VA 23112-2253



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

52-2159-062

Applied For

Not Applicable

Zip

Country

Zip

Country

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

300003327023
-07/18/00-01086-011
*****50.00 *****50.00

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE MGRM ☐ Delete
NAME ARROWSMITH, ROGER S
STREET ADDRESS 1880 EAGLE HARBOR PKWY
CITY-ST-ZIP ORANGE PARK FL 32073

TITLE ~~Member~~ Mgr ☐ Change ☒ Addition
NAME Fenchuk Gary
STREET ADDRESS 14700 Village Square Place
CITY-ST-ZIP Midlothian, Va. 23112

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ~~Member~~ Mgr ☐ Change ☒ Addition
NAME Pearson, Kathryn
STREET ADDRESS 14700 Village Square Place
CITY-ST-ZIP Midlothian, Va. 23112

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ~~Member~~ mgr ☐ Change ☒ Addition
NAME Keen, Allen
STREET ADDRESS 1031 West Morse Blvd., Suite-325
CITY-ST-ZIP Winter Park, FL 32789

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ~~Member~~ mgr ☐ Change ☒ Addition
NAME Dubis, Bev
STREET ADDRESS 1800 Eagle Harbor Parkway
CITY-ST-ZIP Orange Park, FL 32073

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ~~Member~~ mgr ☐ Change ☒ Addition
NAME Kobe, Ron
STREET ADDRESS 1800 Eagle Harbor Parkway
CITY-ST-ZIP Orange Park, FL 32073

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ~~Member~~ mgr ☐ Change ☒ Addition
NAME Bowman, Beanie
STREET ADDRESS 1800 Eagle Harbor Parkway
CITY-ST-ZIP Orange Park, FL 32073

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #