

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M99000001609

1. Entity Name

RST DEVELOPMENT, L.L.C.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 JAN 31 AM 8:12

Principal Place of Business

168 BUSINESS PARK DRIVE, SUITE 200  
VIRGINIA BEACH FL 23462

Mailing Address

168 BUSINESS PARK DRIVE, SUITE 200  
VIRGINIA BEACH FL 23462-6532

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

54-1873052

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

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

TITLE MGR  
NAME COPELAND, ROBERT O  
STREET ADDRESS 168 BUSINESS PARK DRIVE, SUITE 200  
CITY-ST-ZIP VIRGINIA BEACH FL 23462

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

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:

*Robert O. Copeland*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Robert O. Copeland

1/25/00

Date

757 473-3701

Daytime Phone #