## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # P95000025198 Jan 28, 2000 8:00 am **Secretary of State** BBTCLA, INC. 01-28-2000 90143 048 \*\*\*150.00 Mailing Address Principal Place of Business 150 W BRAMBLETON AVE 150 W BRAMBLETON AVE NORFOLK VA 23510 NORFOLK VA 23510-2018 US 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 54-1754617 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S PINE ISLAND RD PLANTATION FL 33324 Zip Code FL 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition ☐ Delete TITI F TITLE NAME NAME RITTER, ALFRED JR. STREET ADDRESS STREET ADDRESS 150 W BRAMBLETON AVE CITY-ST-ZIP CITY-ST-ZIP NORFOLK VA DS Delete 🕽 TITLE NAME RYAN, LOIS F NAME STREET ADDRESS STREET ADDRESS 150 W BRAMBLETON AVE CITY-ST-ZIP CITY-ST-ZIP NORFOLK VA PD- -----. Delete TITLE \_\_\_\_ TITLE NAME WYNNE, JOHN Ó NAME STREET ADDRESS 150 W BRAMBLETON AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NORFOLK VA ☐ Addition TITLE ☐ Change AS ☐ Delete TITLE SMITH, SUSAN NAME NAME STREET ADDRESS STREET ADDRESS 150 W BRAMBLETON AVE CITY-ST-ZIP CITY-ST-ZIP NORFOLK VA ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP thereby 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.