

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**DOCUMENT # P95000067560**

1. Entity Name  
CCH VIRGINIA I, INC.



Principal Place of Business  
4243NORTHLAKEBLVD SUITED  
PALMBEACHGDNS, FL33410

Mailing Address  
4243NORTHLAKEBLVD SUITED  
PALMBEACHGDNS, FL33410

**FILED**  
2006 MAR 29 AM 11:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



03142006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-0603886

Applied For  
Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

BAROT, DILIP  
4243 NORTHLAKE BLVD SUITE D  
PALM BEACH GDNS, FL 33410

**DO NOT WRITE  
IN THIS SPACE**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution.



**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	SVP
NAME	WEIR, JOHN F
STREET ADDRESS	4243-D NORTHLAKE BLVD.
CITY-ST-ZIP	PALM BEACH GARDENS, FL
TITLE	TOP
NAME	BAROT, DILIP
STREET ADDRESS	4243-D NORTHLAKE BLVD.
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410
TITLE	S
NAME	KAKKAR, YASHPAL
STREET ADDRESS	4243-D NORTHLAKE BLVD
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

500069632715  
04/06/06--01041--010 \*\*158.75

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**Yash Pal Kakkar, Secretary**

3/16/06 (561) 627-7988

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #