

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 06 1998 8:00am
Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # F93000005778 (6)
 1. Corporation Name
CK REALTY, INC.



Principal Place of Business: **7500 OLD GEORGETOWN ROAD, 15TH FLOOR BETHESDA MD 20814-6195**
 Mailing Address: **7500 OLD GEORGETOWN ROAD, 15TH FLOOR BETHESDA MD 20814-6195**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/21/1993	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 52-1720754	Applied For <input type="checkbox"/> Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent METZGER, JOHN T ESQUIRE C/O GREENBERG, TRAUERG 777 SOUTH FLAGLER DRIVE, SUITE 301-E WEST PALM BEACH FL 33401				10. Name and Address of New Registered Agent	
				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				FL	85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLARK, A J	1.2 NAME	
STREET ADDRESS	7500 OLD GEORGETOWN ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	BETHESDA MD 20814	1.4 CITY-ST-ZIP	
TITLE	VDT	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NUSSDORF, LAWRENCE C	2.2 NAME	
STREET ADDRESS	7500 OLD GEORGETOWN ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	BETHESDA MD 20814	2.4 CITY-ST-ZIP	
TITLE	AS	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOOKINS, CONNIE S	3.2 NAME	Pumphrey, Connie B.
STREET ADDRESS	7500 OLD GEORGETOWN RD	3.3 STREET ADDRESS	7500 Old Georgetown Road
CITY-ST-ZIP	BETHESDA MD	3.4 CITY-ST-ZIP	Bethesda - MD - 20814
TITLE	AV	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SEAWRIGHT D STEPHENB	4.2 NAME	Seawright, D. Stephen
STREET ADDRESS	7500 OLD GEORGETOWN RD	4.3 STREET ADDRESS	7500 Old Georgetown Road
CITY-ST-ZIP	BETHESDA MD	4.4 CITY-ST-ZIP	Bethesda - MD - 20814
TITLE	SDAT	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GARCHIK, SANDY R	5.2 NAME	Owen, Rebecca L
STREET ADDRESS	7500 OLD GEORGETOWN RD	5.3 STREET ADDRESS	7500 Old Georgetown Road
CITY-ST-ZIP	BETHESDA MD	5.4 CITY-ST-ZIP	Bethesda - MD - 20814
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	Robert J. Flanagan
STREET ADDRESS		6.3 STREET ADDRESS	7500 Old Georgetown Road
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Bethesda - MD - 20814

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Lawrence C. Nussdorf* Vice President 4/10/98 (301) 657-7157

CR2E034 (10/97)