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

PROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # F9600003659 (7)

THE COMMUNICATIONS CENTER (D.C.), INC.

FILED May 08 1997 8:00am Secretary of State



Principal Place	e of Business	Mailing Address			
1350 CONNECTICUT AVE NW WASHINGTON DC 20036		1010 E ROSE ST LAKELAND FL 33801-2016			
				3. Date Incorporated or Qualified 07/19/1996	3a. Date of Last Report
2. Principal Pi	lace of Business E. ROSE ST.	2a. Mailing Address 26 /350 CONNE	CTICAT AVE	4. FEI Number 52-1500283	Applied For Not Applicable
Sulte, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State	6	City & State		6. Election Campaign Financing	Fee Required \$5.00 May Be
	LAND, FL	28 WASHINGTON		Trust Fund Contribution	Added to Fees
Zip 24 3380[Country 25 9. Name and Address of Current	29 2003 6 30	Gountry	8. This corporation has liability for in Florida Statutes 10. Name and Address of New Reg.	Yes No
CORPORATION SERVICE COMPANY 81 Name					
1201 HAYS STREET 82 Street Addre				ress (P.O. Box Number is Not Acceptab	le)
TALLAHASSEE FL 32301-2525					
184 City 185 Zip Code					
黃鸝 됐다면 발표되었다는 사람이 들어가는 사람이 있는데 그런데 그리는데 그리는데 하는데 하는데 하는데 되었다.					FL 85 Zip Code
11. Pursuant office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State (and 607.1508, Florida Statutes, of Florida. Such change was aut	the above-named corp horized by the corporal	poration submits this statement for the plition's board of directors. I hereby accep	urpose of changing its registered in the appointment as registered
agent. I a	im familiar with, and accept the obligation	tions of, Section 607.0505, Florid	ta Statutes.		
SIGNATURE	Signature, typed or printed name of registered agon	t and tille if applicable (NOTE: F	log stered Agent signature requi		DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	DCPT CUNTON, WALTER D	☐ DELETE	1,1 THLE		ERS AND DIRECTORS IN 12 Change Addition Change Addition
NAME	1350 CONNECTICUT AVE NW		1,2 NAME		186
STREET ADDRESS	WASHINGTON DC 20036		1.3 STREET ADDRESS		ZE
CITY-ST-ZIP TITLE	DVS	DELETE	1,4 City-St-ZiP 21 Title		Change Addition
NAME	CLINTON, GERALDINE		22 NAME		Carrier Carrier
STREET ADDRESS	1350 CONNECTICUT AVE NW		2.3 STREET ADDRESS		
CITY-ST-ZIP	WASHINGTON DC 20036		2, 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME .			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		1
CITY-ST-ZIP		T per tea	3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME OVEREN ADDRESS			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		1
CITY-ST-ZIP TITLE		DELETE	4.4 City-St-7iP 5.1 Title		☐ Change ☐ Addition
NAME		— ·-	5.2 NAME		
STREET ADDRESS			. 5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-\$1-7IP		
TITLE		☐ DELETE	6.1 THLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP		with this files does not a stiff of	6.4 CHY-ST-7IP	d in Continue 140 07(0)(i) Florida Cratida	1 further and if the 4 the
Informatio	on indicated on this annual report or su	applemental annual report is truc the receiver or trustee empower	e and accurate and that ed to execute this repor	d in Section 119.07(3)(i), Florida Statutes t my signature shall have the same lega rt as required by Chapter 607, Florida S	l effect as if made under oath; that
SIGNATURE: 816/10/18/19 4/29/97 202-223-4747					
A1411111	SIGNATURE AND TYPEO OR	PRINTED NAME OF SIGNING OFFICER OF	DIRECTOR	Date	Daytime Phone # 0386849
			!		€ And Code

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FLORIDA DEPARTMENT OF STATE Sandra B. Mortham