

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90166 027 ***150.00

DOCUMENT # P04735

1. Entity Name

DON RICHARD ASSOCIATES INTERNATIONAL, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
6411 IVY LANE

3. Mailing Address
6411 IVY LANE

Suite, Apt., etc.
SUITE 308

Suite, Apt., etc.
SUITE 308

DO NOT WRITE IN THIS SPACE

City & State
GREENBELT, MD

City & State
GREENBELT, MD

4. FEI Number
52-1348581

Applied For
Not Applicable

Zip
20770-1405

Country
USA

Zip
20770-1405

Country
USA

5. Certificate of Status Desired \$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
CT-CORPORATION-SYSTEM

Street Address (P.O. Box Number is Not Acceptable)

1200 S. PINE ISLAND ROAD

City PLANTATION FL Zip Code 33324

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

PTD
GRANDI, DONALD L.
822 WYNDEMERE WAY
NAPLES FL 34105-7167

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

VSD
TUTWILER, RICHARD G.
417 ROSEMEADE LANE
NAPLES FL 34105-7155

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
GRANDI, KATHLEEN E.
822 WYNDEMERE WAY
NAPLES FL 34105-7167

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
TUTWILER, MYRA L.
417 ROSEMEADE LANE
NAPLES FL 34105-7155

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
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CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

13. 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DONALD L. GRANDI

Date

Daytime Phone #

4-26-02 301-345-4000

CR2E034B (12/01)