

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 11, 2002 8:00 am
Secretary of State

02-11-2002 90219 008 ***150.00

DOCUMENT # P32529
1. Entity Name
MARTIN MARIETTA OVERSEAS CORPORATION

Principal Place of Business **Mailing Address**
6801 ROCKLEDGE DR. **P O BOX 8048 . BLDG 100**
BETHESDA MD 20817 **ROOM ~~24215~~ U4215**
 PHILADELPHIA PA 19101-8048



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business **3. Mailing Address**
Same as above *Same as above*
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State **City & State**

4. FEI Number **Applied For**
52-1360141 Not Applicable

Zip **Country** **Zip** **Country**

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

6. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** **Zip Code**

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 _____ (NOTE: Registered Agent signature required when reinstating) **DATE** _____
Signature, typed or printed name of registered agent and title if applicable.

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
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	PD NELSON, JAMES R ✓ 6801 ROCKLEDGE DR. BETHESDA MD 20817	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GC WEISSMAN, HOWARD O. ✓ 6801 ROCKLEDGE DR. BETHESDA MD 20817	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOWERS, EDGAR G ✗ 6801 ROCKLEDGE DR. BETHESDA MD 20817	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WILLIAMS, MARIANNE S ✗ 6801 ROCKLEDGE DR. BETHESDA MD 20817	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TC RIGHTNOUR, DONALD ✓ 6801 ROCKLEDGE DR. BETHESDA MD 20817	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT IDE, MARCUS B ✓ 6801 ROCKLEDGE DR. BETHESDA MD 20817	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	David Buchanan Director 6801 Rockledge DR Bethesda, MD 20817	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS DANA L Bennett 6801 Rockledge DR Bethesda, MD 20817	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ **116-02** **610-354-1254**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

Lockheed Martin Shared Services
Valley Forge Service Center
Post Office Box 8048, Building 100, MS U4215 Philadelphia, PA 19101

Attachment
Doc# P02529

821193

LOCKHEED MARTIN



January 16, 2002

Division of Corporations
Uniform Business Report Filings
P O Box 1500
Tallahassee, FL 32302-1500

Re: Martin Marietta Overseas Corporation
FID# 52-1360141

Dear Gentlemen,

Enclosed please find our check number 2362002, in the amount of \$150.00 for our year 2002 Florida Uniform Business Report.

If you need any further information, you may contact me at 610-354-1799.

Sincerely,

Diane R Williams

Diane R Williams
Tax Analyst