## **2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000000265

Entity Name: SAUL CENTERS, INC.

**Current Principal Place of Business:** 

7501 WISCONSIN AVE SUITE 1500

BETHESDA, MD 20814-6522

## **Current Mailing Address:**

7501 WISCONSIN AVE, STE 1500 LEGAL DEPARTMENT BETHESDA, MD 20814-6522 US

FEI Number: 52-1833074 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

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:

Electronic Signature of Registered Agent

Date

FILED Apr 17, 2014

**Secretary of State** 

CC8498839370

Officer/Director Detail:

Title SVP Title VP

Name HACHEY, DONALD A Name PHILLIPS, LYNN

Address 7501 WISCONSIN AVE, STE 1500E Address 7501 WISCONSIN AVE, STE 1500E

City-State-Zip: BETHESDA MD 20814 City-State-Zip: BETHESDA MD 20814

Title SVP Title ASTS

Name SHERREN, CHARLES W JR. Name SUSTERICH, MERLE F

Address 7501 WISCONSIN AVE, STE 1500E Address 7501 WISCONSIN AVE, STE 1500E

City-State-Zip: BETHESDA MD 20814 City-State-Zip: BETHESDA MD 20814

Title CEO, DIRECTOR Title EXECUTIVE VICE PRESIDENT

Name SAUL II, B. FRANCIS Name LANSDALE, J. PAGE

Address 7501 WISCONSIN AVENUE Address 7501 WISCONSIN AVENUE

SUITE 1500 E SUITE 1500 E

City-State-Zip: BETHESDA MD 20814 City-State-Zip: BETHESDA MD 20814

Title SENIOR VICE PRESIDENT, CFO, Title SENIOR VICE PRESIDENT, CAO

SECRETARY, TREASURER Name FRIEDMAN, JOEL A.

Name SCHNEIDER, SCOTT V. Address 7501 WISCONSIN AVENUE

Address 7501 WISCONSIN AVENUE SUITE 1500 E

SUITE 1500 E City-State-Zip: BETHESDA MD 20814

City-State-Zip: BETHESDA MD 20814

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: SCOTT V. SCHNEIDER SECRETARY 04/17/2014

Electronic Signature of Signing Officer/Director Detail

Date