

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000001406

**Entity Name:** GELMAN, ROSENBERG & FREEDMAN, A PROFESSIONAL CORPORATION**FILED**  
**Mar 20, 2019**  
**Secretary of State**  
**4679823728CC****Current Principal Place of Business:**4550 MONTGOMERY AVENUE  
SUITE 650N  
BETHESDA, MD 20814**Current Mailing Address:**4550 MONTGOMERY AVENUE  
SUITE 650N  
BETHESDA, MD 20814 US**FEI Number: 52-1392008****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**NRAI SERVICES, INC  
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**Officer/Director Detail :**

Title      PRESIDENT, DIRECTOR  
Name      GRALING, DAVID  
Address    4550 MONTGOMERY AVENUE  
            SUITE 650N  
City-State-Zip: BETHESDA MD 20814

Title      VP, DIRECTOR  
Name      CARDELLO, JACQUELINE  
Address    4550 MONTGOMERY AVENUE  
            SUITE 650N  
City-State-Zip: BETHESDA MD 20814

Title      SECRETARY, TREASURER,  
            DIRECTOR  
Name      SHUMAN, IAN  
Address    4550 MONTGOMERY AVENUE  
            SUITE 650N  
City-State-Zip: BETHESDA MD 20814

Title      DIRECTOR  
Name      ALBRECHT, ROBERT  
Address    4550 MONTGOMERY AVENUE  
            SUITE 650N  
City-State-Zip: BETHESDA MD 20814

Title      DIRECTOR  
Name      ALEXANDROU, ANDREAS  
Address    4550 MONTGOMERY AVENUE  
            SUITE 650N  
City-State-Zip: BETHESDA MD 20814

Title      DIRECTOR  
Name      BOLAND, AMY  
Address    4550 MONTGOMERY AVENUE  
            SUITE 650N  
City-State-Zip: BETHESDA MD 20814

Title      DIRECTOR  
Name      DEYHLE, WALTER  
Address    4550 MONTGOMERY AVENUE  
            SUITE 650N  
City-State-Zip: BETHESDA MD 20814

Title      DIRECTOR  
Name      LARSON, JAMES  
Address    4550 MONTGOMERY AVENUE  
            SUITE 650N  
City-State-Zip: BETHESDA MD 20814

**Continues on page 2**

*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: DAVID GRALING****PRESIDENT****03/20/2019**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name LAWRENCE, ERIC  
Address 4550 MONTGOMERY AVENUE  
SUITE 650N  
City-State-Zip: BETHESDA MD 20814

Title DIRECTOR  
Name TURNER, TROY  
Address 4550 MONTGOMERY AVENUE  
SUITE 650N  
City-State-Zip: BETHESDA MD 20814

Title DIRECTOR  
Name MCKNIGHT, TERRI  
Address 4550 MONTGOMERY AVENUE  
SUITE 650N  
City-State-Zip: BETHESDA MD 20814