## **2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F19000002118

Entity Name: AVIAN OF MARYLAND, INC.

**Current Principal Place of Business:** 

22111 THREE NOTCH RD LEXINGTON PARK. MD 20653

**Current Mailing Address:** 

22111 THREE NOTCH RD

LEXINGTON PARK. MD 20653 US

FEI Number: 83-0414964 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORP SERVICES, INC. 3458 LAKESHORE DRIVE TALLAHASSEE, FL 32312 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 27, 2023

**Secretary of State** 

4835506784CC

Officer/Director Detail:

Title DIRECTOR Title PRESIDENT

Name SWITICK, KEVIN G Name SWITICK, KEVIN G

Address 22111 THREE NOTCH RD Address 22111 THREE NOTCH RD

City-State-Zip: LEXINGTON PARK MD 20653 City-State-Zip: LEXINGTON PARK MD 20653

Title SECRETARY Title TREASURER

Name DANIELSON, JEFFREY M Name VERDON, JOHN T

Address 22111 THREE NOTCH RD Address 22111 THREE NOTCH RD

City-State-Zip: LEXINGTON PARK MD 20653 City-State-Zip: LEXINGTON PARK MD 20653

Title DIRECTOR Title DIRECTOR

Name SHERMAN, JEFFERSON W Name DYER, JOSEPH W

Address 22111 THREE NOTCH ROAD Address 22111 THREE NOTCH ROAD

City-State-Zip: LEXINGTON PARK MD 20653 City-State-Zip: LEXINGTON PARK MD 20653

Title VP

Name FRANZ, GEORGE

Address 22111 THREE NOTCH ROAD

City-State-Zip: LEXINGTON PARK MD 20653

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: JEFFREY M DANIELSON

**SECRETARY** 

04/27/2023

Electronic Signature of Signing Officer/Director Detail

Date