

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 06, 2002 8:00 am**  
**Secretary of State**

05-06-2002 90222 009 \*\*\*150.00

**DOCUMENT # 688884**

1. Entity Name

**COMMERCE CENTER DEVELOPMENT CORP.**

Principal Place of Business

**8401 CONNECTICUT AVE  
 ATTN: KIM BRANDON  
 CHEVY CHASE MD 20815**

Mailing Address

**8401 CONNECTICUT AVE  
 ATTN: KIM BRANDON  
 CHEVY CHASE MD 20815**

2. Principal Place of Business

**7501 Wisconsin Avenue**

3. Mailing Address

**7501 Wisconsin Avenue**

Suite, Apt. #, etc.

**Suite 1500**

Suite, Apt. #, etc.

**Suite 1500**

City & State

**Bethesda MD**

City & State

**Bethesda MD**

4. FEI Number

**52-1218501**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM  
 1200 S. PINE ISLAND ROAD  
 PLANTATION FL 33324**

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

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)

**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	<input type="checkbox"/> Delete
VD	HEASLEY, ROSS E.	8401 CONNECTICUT AVE.	CHEVY CHASE, MD 0	<input type="checkbox"/>
C	SAUL II, B FRANCIS	8401 CONNECTICUT AVE	CHEVY CHASE, MD 0	<input type="checkbox"/>
T	ALBRIGHT, WILLIAM K.	12727 ELDRID PL	SILVER SPRING MD	<input checked="" type="checkbox"/>
PD	CARACI, PHILIP	8401 CONNECTICUT AVE	CHEVY CHASE, MD 0	<input type="checkbox"/>
D	CLARK, PATRICIA	8401 CONNECTICUT AVE	CHEVY CHASE, MD 0	<input type="checkbox"/>
AS	BRANDON, KIMBERLEY J.	8401 CONNECTICUT AVE	CHEVY CHASE, MD 00000	<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
		7501 Wisconsin Avenue, Suite 1500	Bethesda MD 20814-6522	<input type="checkbox"/>	<input type="checkbox"/>
C	Saul III, B. Francis	7501 Wisconsin Avenue, Suite 1500	Bethesda MD 20814-6522	<input type="checkbox"/>	<input type="checkbox"/>
T	Tzamaras, Bill D.	7501 Wisconsin Avenue, Suite 1500	Bethesda MD 20814-6522	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		7501 Wisconsin Avenue, Suite 1500	Bethesda MD 20814-6522	<input type="checkbox"/>	<input type="checkbox"/>
		7501 Wisconsin Avenue, Suite 1500	Bethesda MD 20814-6522	<input type="checkbox"/>	<input type="checkbox"/>
		7501 Wisconsin Avenue, Suite 1500	Bethesda MD 20814-6522	<input type="checkbox"/>	<input type="checkbox"/>
		7501 Wisconsin Avenue, Suite 1500	Bethesda MD 20814-6522	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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:

*Ross E Heasley*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-17-02  
 Date

(301) 986-6256  
 Daytime Phone #

CR2E034 (9/01)