

815208

Annual Report  
filed 8-6-70

0000025375.00--7

2 pgs.

# Corporation Report and Tax Return for Foreign and Domestic Corporations

State of Florida  
DEPARTMENT OF REVENUE

Tallahassee, Florida

Refer to This Number  
in All Correspondence  
7A-08-F-815208  
04/14/61

This return is due  
on July 1  
1970

MARQUITT CORPORATION  
5161 RIVER ROAD  
WASHINGTON, D.C. 20516

AUG--6-70 791491 JH 8 15208 BLST -- RI 2,000.00

|                                                                                                                    |  |                                                                                                                                                                                                                                    |                            |
|--------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|
| 1. <u>Marriott Corporation</u><br>(Give exact name of corporation)                                                 |  | 2. (General nature of business)                                                                                                                                                                                                    |                            |
| 3. <u>5161 River Road</u><br>(Street or Post Office Box of principal place of business)                            |  | <u>Bethesda</u><br>(City)                                                                                                                                                                                                          | <u>Maryland</u><br>(State) |
| 4. a. (Officers Name)                                                                                              |  | (Address)                                                                                                                                                                                                                          |                            |
| b. (Title)                                                                                                         |  |                                                                                                                                                                                                                                    |                            |
| c. <u>SEE attached list</u>                                                                                        |  |                                                                                                                                                                                                                                    |                            |
| d. (Address)                                                                                                       |  |                                                                                                                                                                                                                                    |                            |
| 5. a. (Director's Name) (Law requires at least (3) three)                                                          |  | (Address)                                                                                                                                                                                                                          |                            |
| b. (Title)                                                                                                         |  |                                                                                                                                                                                                                                    |                            |
| c. <u>SEE attached list</u>                                                                                        |  |                                                                                                                                                                                                                                    |                            |
| d. (Address)                                                                                                       |  |                                                                                                                                                                                                                                    |                            |
| 6. <u>INE Corporation Company, 110 W. Forsyth Street, Jacksonville, Florida</u><br>(Resident Agent Name) (Address) |  |                                                                                                                                                                                                                                    |                            |
| 7. Last meeting of Directors <u>11-17-69</u><br>(Month - Day - Year)                                               |  | 8. Corporation Active? <u>Yes</u> If inactive, inactivity began (Month - Day - Year)                                                                                                                                               |                            |
| 10. If inactive, will corporation begin business in the future? (Yes or No)                                        |  | 11. Date Incorporated <u>7-10-29</u><br>(Month - Day - Year)                                                                                                                                                                       |                            |
| 12. Date Qualified in Fla. <u>4-14-61</u><br>(Month - Day - Year)                                                  |  |                                                                                                                                                                                                                                    |                            |
| 13. Total Authorized Capital Stock:<br>\$ <u>100 NPV</u>                                                           |  | 14. Outstanding Capital Stock: (issued)<br>(a) \$ <u>100 NPV</u> (Total value)<br>(b) \$ <u>36,374.160</u> (Total value)<br>(c) \$ <u>36,374.160</u> (Total value)<br>(d) Total (a) + (b) + (c) \$ <u>36,374.160</u> (Total value) |                            |
| 15. Amount of tax Due \$ <u>2,000.00</u>                                                                           |  | 16. Less Credit                                                                                                                                                                                                                    |                            |
| 17. Memo if any \$                                                                                                 |  | 18. Penalty and Interest (see instructions) \$                                                                                                                                                                                     |                            |
| 19. Amount of tax remitted with this return \$ <u>2,000.00</u>                                                     |  | 20. If foreign corporation, give amount of capital employed in Florida. \$ <u>3,634,566</u>                                                                                                                                        |                            |
| 21. We, the undersigned, certify the above statement of facts to be true and correct as shown by our books.        |  | 22. If foreign corporation, give the number of States in which you do business. <u>20</u>                                                                                                                                          |                            |

By Robert B. Morris  
President or V-President  
Attest: Robert B. Morris  
Secretary  
STATE OF Maryland  
COUNTY OF Montgomery  
Personally appeared before me Robert B. Morris  
who deposes and says that he executed this certificate for and in behalf of said corporation and  
that the statement herein contained is true and correct to the best of his knowledge and belief.

Sworn to and subscribed before me this 30th day of June 19 70

(Notary Seal)

Signature of Notary taking acknowledgment

Send Original (with Remittance) TO THE DEPARTMENT OF REVENUE, TALLAHASSEE, FLORIDA

Send First copy to The Department of State, Tallahassee, Florida

ORIGINAL

(SEE INSTRUCTIONS ON BACK OF LAST COPY)