2007 FOR PROFIT CORPORATION

FILED Apr 16, 2007 8:00 am Secretary of State

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				Secretary or state					
1. Entity Name	MENT # 827450 OS. MANAGEMENT CORP	ORATION		04-16-2007 90069 024 ***150.00					
Dringing Diggs	of Business	Mailing Address							
Principal Place 8607 WESTW VIENNA, VA	OOD CENTER DR.	Mailing Address 8607 WESTWOOD CENT VIENNA, VA 22182	ER DR.	40062253					
2. Principal Pl	ace of Business - No P.O. Box #	3. Mailing Address							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		03012007 Chg-P CR2E034 (12/06)					
City & State		City & State		4. FEI Number Applied For 52-0905598 Not Applicable					
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required					
	6. Name and Address of Current F	legistered Agent	1	7. Name and Address of New Registered Agent					
		<u> </u>	Name						
UNITED ST	TATES CORPORATION COMP	PANY							
1201 HAYS SUITE 105	STREET		Street A	Street Address (P.O. Box Number is Not Acceptable)					
IALLAHAS	SSEE, FL 32301								
			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. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstailing) DATE									
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees									
10.	OFFICERS AND I	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE	SVPT	Delete	TITLE	President /COO/Director Change Addition					
NAME	LITTLE, MICHAEL		NAME	Shannon, MICHAEL 8607 WESTWOOD CENTER DRIVE					
STREET ADDRESS	8607 WESTWOOD CENTER DR		STREET ADDRESS						
CITY-ST-ZIP	VIENNA, VA 22182		CITY-ST-ZIP	VIENNA, VA 22182					
LUTE	CED	☐ Delete	TITLE	CEO/Girector Change Addition					
NAME	FELD,KENNETH J.		NAME	Feld, Kennery 8607 Westwood Center Drive					
STREET ADDRESS	9609 HALTER COURT		STREET ADDRESS	8607 MESTOSE CENTER CLIVE					
CITY-ST-ZIP	POTOMAC, MD		CITY-ST-ZP	Vienna, VA 22182					
TITLE	VSD	☐ Delete	TITLE	Executive VP/Secretary/Director Change Addition					
NAME	SOWALSKY, JEROME S.		NAME	Sowalsky, Jerone					
STREET ADDRESS	8613 CHATEAU DR.		STREET ADDRESS	8607 Westwood Center Drive					
CITY-ST-ZIP	POTOMAC, MD		CITY-ST-ZIP	Vienna, VA 22182					
TITLE	AT	☐ Delete	TOLE	VP/controller /Asst Treasurer Achons - Addition					
NAME	SENGLAUB, KEITH	D01010	NAME	Senglando, Keith 6607 Westwood Center Drive					
STREET ADDRESS	8607 WESTWOOD CENTER DR		STREET ADDRESS	8607 Westwood Center Drive					
CITY-ST-ZIP	VIENNA, VA 22182		CITY-ST-ZIP	Vienna, VA 22182					
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition					
NAME		□ Detete	NAME						
STREET ADDRESS			STREET ADDRESS						
CITY-ST-ZIP			CITY-S1-ZIP						
			-	☐ Change ☐ Addition					
TUTE		Delete	TITLE	Change C Addition					
NAME CYCLUL ADDRESS	•		NAME PIRET ADDRESS	į l					
STREET ADDRESS			STREET ADDRESS CHTY-ST-ZIP						
				<u></u>					
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if									

changed, or on an attachment with an address, with all other like empowered.