

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 848735 (7)

1. Corporation Name

MOBIL LAND DEVELOPMENT CORPORATION



Principal Place of Business

11911 FREEDOM DRIVE
RESTON VA 22090
US

Mailing Address

PO BOX 900
TAX ADMIN. - RM 622A
DALLAS TX 75221
US

3. Date Incorporated or Qualified
04/03/1981

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

25

3225 GALLOWES ROAD

Suite, Apt. #, etc.

27

STATE TAX DEPT.

City & State

28

FAIRFAX VA

Zip

29

22037

Country

30

4. FEI Number

13-2668993

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME DEIHL, W. D.
STREET ADDRESS 11911 FREEDOM DRIVE
CITY-ST-ZIP RESTON VA

TITLE VD ☐ DELETE

NAME GRECO, N.G.
STREET ADDRESS 11911 FREEDOM DRIVE
CITY-ST-ZIP RESTON VA

TITLE AS ☒ DELETE

NAME BOOK, R.L.
STREET ADDRESS 1201 ELM ST.
CITY-ST-ZIP DALLAS TX

TITLE S ☐ DELETE

NAME STEVENSON P
STREET ADDRESS 3225 GALLOWES RD
CITY-ST-ZIP FAIRFAX VA

TITLE T ☐ DELETE

NAME CASELLI, J.A.
STREET ADDRESS 3225 GALLOWES ROAD
CITY-ST-ZIP FAIRFAX VA

TITLE AS ☒ DELETE

NAME OLSON, CT
STREET ADDRESS 1201 ELM STREET
CITY-ST-ZIP DALLAS TX

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

AS

Breed, J. H.

11911 FREEDOM DRIVE

RESTON VA 22090

AS

GARNEY, G. G.

3225 GALLOWES ROAD

FAIRFAX VA 22037

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changing, or on an attachment with an address.

SIGNATURE:

G. G. GARNEY ASST SECRETARY

Date

4/18/96

(703) 846-0900

Daytime Phone

CR2E034 (12/95)