

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 848735

1. Entity Name

MOBIL LAND DEVELOPMENT CORPORATION

Principal Place of Business

11911 FREEDOM DRIVE  
RESTON VA 22090  
US

Mailing Address

3225 GALLOWES ROAD  
STATE TAX DEPT.  
FAIRFAX VA 22037-0001  
US

2. Principal Place of Business

3. Mailing Address

800 Bell Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

State Tax Dept

City & State

City & State

Houston, TX

Zip

Country

Zip

Country

77002

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME PATOCKA, B.A.  
STREET ADDRESS 3225 GALLOWES ROAD  
CITY-ST-ZIP FAIRFAX VA 22037 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VASD  
NAME SKLANSKY, P E  
STREET ADDRESS 3225 GALLOWES ROAD  
CITY-ST-ZIP FAIRFAX VA 22037 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE EVD  
NAME GRECO, N G  
STREET ADDRESS 3225 GALLOWES RD.  
CITY-ST-ZIP FAIFAX VA 22037 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S  
NAME STEVENSON P  
STREET ADDRESS 3225 GALLOWES RD  
CITY-ST-ZIP FAIRFAX VA 22037 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T  
NAME SARNOWSKI, J.A.  
STREET ADDRESS 3225 GALLOWES ROAD  
CITY-ST-ZIP FAIRFAX VA 22037 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE AC  
NAME LOPEZ, S.A.  
STREET ADDRESS 3225 GALLOWES ROAD  
CITY-ST-ZIP FAIRFAX VA 22037 ☐ Delete

TITLE  
NAME  
STREET ADDRESS 800 Bell Street  
CITY-ST-ZIP Houston, TX 77002 ☒ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

S.A. Lopez Asst. Controller, 04-10-00 (713) 656-1807

FILED  
Apr 18, 2000 8:00 am  
Secretary of State

04-18-2000 90183 010 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

4. FEI Number

13-2668993

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional Fee Required

CR2E034 (9/99)