

PAGE 1 of 3

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F000000003009

1. Entity Name

CES Facilities Management Services, Inc.

Principal Place of Business

2345 Crystal Drive
Tenth Floor
Arlington, VA 22202

Mailing Address

2345 Crystal Drive
Tenth Floor
Arlington, VA 22202

2. Principal Place of Business

2345 Crystal Drive

3. Mailing Address

2345 Crystal Drive

Suite, Apt. #, etc.

Tenth Floor

Suite, Apt. #, etc.

Tenth Floor

City & State

Arlington, VA

City & State

Arlington, VA

Zip

22202

Country

Arlington

Zip

22202

Country

Arlington

4. FEI Number

54-1961798

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Corporation Service Company
1201 South Hays Street
Tallahassee, FL 32301

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, 2001 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

PLEASE SEE ATTACHMENT - NO ☐ Delete
CHANGES

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

900004184633

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
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NAME
STREET ADDRESS
CITY-ST-ZIP

☐ 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

Robert D. Zimet, Secretary 4/30/01 (703) 920-8500

Date

Daytime Phone #

CR2E034 (11/00)

ATTACHMENT

Business Address of each Director and Officer: 2345 Crystal Drive
Eleventh Floor
Arlington, VA 22202

<u>NAME</u>	<u>TITLE</u>
Robert H. Smith	Director
Robert P. Kogod	Director
Ernest Gerardi, Jr.	Director
Philip B. Rogers	President
Deborah F. Crosby	Senior VP
Oliver Hernandez	Vice President
Philip D. Sayers	Treasurer
Robert D. Zimet	Secretary

PAGE 303



ACCOUNT NO. : 072100000032

REFERENCE : 133854 131022B

AUTHORIZATION :

Patricia Pigute

COST LIMIT : \$ 150.00

ORDER DATE : April 30, 2001

ORDER TIME : 2:02 PM

ORDER NO. : 133854-010

CUSTOMER NO: 131022B

CUSTOMER: Roxanne Brotherton, Legal Asst
Charles E. Smith Companies
2345 Crystal Drive
10th Floor
Arlington, VA 22202

ANNUAL REPORT FILING

NAME: CES FACILITIES MANAGEMENT
SERVICES, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward - Ext. 1135

EXAMINER'S INITIALS: _____

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 MAY - 1 PM 3:23
NOT ATTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING