## **FILED** Feb 10, 2002 8:00 am Secretary of State

02-10-2002 90015 036 \*\*\*158.75

## 2002 UNIFORM BUSINESS REPORT (UBR)

F0000003009 DOCUMENT, # 1. Entity Name 📜

CES FACILITIES MANAGEMENT SERVICES, INC.

Principal Place of Business

Mailing Address

2345 CRYSTAL DRIVE. TENTH FLOOR

ARLINGTON VA 22202

2345 CRYSTAL DRIVE. TENTH FLOOR

ARLINGTON VA 22202



Zip Country Zip Country 5. Certificate of Status Desired \$8.75 Ad Fee Require CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525  City FL Zip Cod  3. The above named entity submits this statement for the purpose of changing its 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  Ps. This comporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00  Tay filing requirement and elects to do so.  After May 1, 2002 Fee will be \$550.00  10. Election Campaign Financing \$5.00	ed
Zip Country Zip Country 5. Certificate of Status Desired D	lot Applicated ditional ed
S. Name and Address of Current Registered Agent  CORPORATION SERVICE COMPANY 1201 HAYS STREET  TALLAHASSEE FL 32301-2525  City  FL  Zip Cod  This 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 reinstalling)  Parties corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so.  (See criteria on back)  Difficers AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  Trust Fund Contribution.  Added Change  NAME  STREET ADDRESS  CITY-ST-ZP  ARLINGTON VA 22202  CITY-ST-ZIP  ARLINGTON VA 22202	ed
CORPORATION SERVICE COMPANY 1201 HAYS STREET  TALLAHASSEE FL 32301-2525  City FL Zip Cod  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)  9. This corporation its eligible to satisfy its Intangible Tax filling requirement and elects to do so.  (See criteria on back)  11.  OFFICERS AND DIRECTORS  12.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11.  P AGGERS, PHILIP B 2345 CRYSTAL DRIVE, ELEVENTH FLOOR ARIUNGTON VA 22202  ITILE NAME STREET ADDRESS CITY-S1-ZIP  ARLINGTON VA 22202  CITY-S1-ZIP  ARLINGTON VA 22202  CITY-S1-ZIP  RIME CROSBY, DEBORAH F 2345 CRYSTAL DRIVE, ELEVENTH FLOOR ARLINGTON VA 22202  CITY-S1-ZIP  CITY-S1-ZIP  City FL  Street Address (P.O. Box Number is Not Acceptable)  City FL  Street Address (P.O. Box Number is Not Acceptable)  Title NAME STREET ADDRESS CITY-S1-ZIP  City FL  STREET ADDRESS CITY-S1-ZIP  CITY-S1-ZIP  City ST-ZIP  City ST-ZIP  City S1-ZIP  City S1	de
CORPORATION SERVICE COMPANY 1201 HAYS STREET  TALLAHASSEE FL 32301-2525  City  FL  Zip Cod  The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.  Signature, typed or printed name of registered agent and title if applicable  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 filling requirement and elects to do so.  (See or iteria on back)  The above named entity submits this statement for the purpose of changing its registered Agent signature required when reinstating)  DATE  9: This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so.  Make Check Payable to Department of State  10. Election Campaign Financing Trust Fund Contribution.  Added Street Address (P.O. Box Number is Not Acceptable)  The Street Address (P.O. Box Number is Not Acceptable)  The Street Address (P.O. Box Number is Not Acceptable)  The Street Address (P.O. Box Number is Not Acceptable)  The Street Address (P.O. Box Number is Not Acceptable)  The Street Address (P.O. Box Number is Not Acceptable)  The Street Address (P.O. Box Number is Not Acceptable)  The Street Address (P.O. Box Number is Not Acceptable)  The Street Address (P.O. Box Number is Not Acceptable)  The Street Address (P.O. Box Number is Not Acceptable)  The Street Address (P.O. Box Number is Not Acceptable)  The Street Address (P.O. Box Number is Not Acceptable)  The Street Address (P.O. Box Number is Not Acceptable)  The Street Address (P.O. Box Number is Not Acceptable)  The Street Address (P.O. Box Number is Not Acceptable)  The Street Address (P.O. Box Number is Not Acceptable)  The Street Address (P.O. Box Number is Not Acceptable)  The Street Address (P.O. Box Number is Number is not in the if applicable is particular agent and its in the if applicable is particular agent and its in the if applicable	le
1201 HAYS STREET  TALLAHASSEE FL 32301-2525  City  FL  Zip Cod  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 filling requirement and elects to do so. (See criteria on back)  TILE  OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TILE  NAME  ROGERS, PHILIP B  2345 CRYSTAL DRIVE, ELEVENTH FLOOR  ARLINGTON VA 22202  TITLE  NAME  CROSSY, DEBORAH F  2345 CRYSTAL DRIVE, ELEVENTH FLOOR  ARLINGTON VA 22202  CITY-SI-ZIP  ARLINGTON VA 22202  CITY-SI-ZIP  ARLINGTON VA 22202  CITY-SI-ZIP  ARLINGTON VA 22202	ie .
1201 HAYS STREET TALLAHASSEE FL 32301-2525  City FL Zip Cod  3. 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 algrature required when reinstating)  9: This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back)  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. Election Campaign Financing Trust Fund Contribution.  \$5.0 Adder  \$5.0 Campaign Financing Trust Fund Contribution.  14. Clection Campaign Financing Trust Fund Contribution.  15. Clection Campaign Financing Trust Fund Contribution.  16. Election Campaign Financing Trust Fund Contribution.  17. Clange  NAME  ROGERS, PHILIP B  2345 CRYSTAL DRIVE, ELEVENTH FLOOR  ARLINGTON VA 22202  16. Election Campaign Financing Trust Fund Contribution.  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  17. Change  NAME  STREET ADDRESS  CITY-ST-ZIP  17. Election Campaign Financing Trust Fund Contribution.  18. Election Campaign Financing Trust Fund Contribution.  19. Election Campaign Financing Trust Fund Contribution.  10. Election Campaign Financing Trust Fund Contribution.  17. Election Campaign Financing Trust Fund Con	de
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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 late if applicable. (NOTE: Registered Agent signature required when reinstating)  9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back)  10. Election Campaign Financing Trust Fund Contribution.  After May 1, 2002 Fee will be \$550.00  Make Check Payable to Department of State  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TITLE  NAME  ROGERS, PHILIP B  2345 CRYSTAL DRIVE, ELEVENTH FLOOR  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  NAME  STREET ADDRESS  CITY-ST-ZIP  ARLINGTON VA 22202  CITY-ST-ZIP  ARLINGTON VA 22202  CITY-ST-ZIP  ARLINGTON VA 22202  CITY-ST-ZIP  ARLINGTON VA 22202	de
SIGNATURE   Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling)  9: This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  15. Cappaign Financing Trust Fund Contribution. (State)  16. Election Campaign Financing Trust Fund Contribution. (State)  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  19. This corporation is eligible to satisfy its Intangible After May 1, 2002 Fee will be \$550.00  10. Election Campaign Financing Trust Fund Contribution. (Change Trust Fund Contribution.)  10. Election Campaign Financing Trust Fund Contribution. (Change Trust Fund Contribution.)  10. Election Campaign Financing Trust Fund Contribution. (Change Trust Fund Contribution.)  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. Cappaign Financing Trust Fund Contribution. (Change Trust Fund Contribution.)  14. Election Campaign Financing Trust Fund Contribution. (Change Trust Fund Contribution.)  15. Cappaign Financing Trust Fund Contribution. (Change Trust Fund Contribution.)  16. Election Campaign Financing Trust Fund Contribution. (Change Trust Fund Contribution.)  17. Election Campaign Financing Trust Fund Contribution. (Change Trust Fund Contribution.)  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  19. Change Trust Fund Contribution. (Change Trust Fund Contribution.)  19. Election Campaign Financing Trust Fund Contribution. (Change Trust Fund Contribution.)  10. Election Campaign Financing Trust Fund Contribution. (Change Trust Fund Contribution.)  10. Election Campaign Financing Trust Fund Contribution. (Change Trust Fund	
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 filling requirement and elects to do so. (See criteria on back)  Tax filling requirement and elects to do so. (Make Check Payable to Department of State)  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  ITILE  NAME  ROGERS, PHILIP B  2345 CRYSTAL DRIVE, ELEVENTH FLOOR  ARLINGTON VA 22202  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  ARLINGTON VA 22202  CITY-ST-ZIP  CHange  Change  NAME  STREET ADDRESS  CITY-ST-ZIP  ARLINGTON VA 22202  CITY-ST-ZIP  CITY-ST-ZIP  CHANGE  CITY-ST-ZIP  CITY-ST-ZIP	
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NAME SAYERS, PHILIP D	
STREET ADDRESS 2345 CRYSTAL DRIVE, ELEVENTH FLOOR CITY-ST-7/P	_

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

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Delete

SIGNATURE: Deborah FACTOS by

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**ARLINGTON VA 22202** 

**ARLINGTON VA 22202** 

2345 CRYSTAL DRIVE, ELEVENTH FLOOR

SMITH, ROBERT H

SIGNATURE AND TYPED OR PRINT

Daytime Phone #

☐ Change

Addition