2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State
04-21-2003 91065 020 ***150.00

F00004178

DOCUMENT # F00000004178

1. Entity Name
MAINSTREET RETAIL, INC.

Principal Place of Business	Mailing Address
1300 WILSON BLVD., SUITE 400 ARLINGTON, VA 22209	1300 WILSON BLVD., SUITE 400 ARLINGTON, VA 22209

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 54-1883170 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD SIEGEL, LAURENCE C 1300 WILSON BLVD., SUITE 400 ARLINGTON, VA 22209	☐ Delete	CEO, PRESIDENT	☐ Change XX ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SEVP DAUSCH, JAMES F 1300 WILSON BLVD., SUITE 400 ARLINGTON, VA 22209	☐ Delete	DIRECTOR, [illegible]	XX Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	EVP BERSON, JUDITH S 1300 WILSON BLVD., SUITE 400 ARLINGTON, VA 22209	XX Delete	COO, DIRECTOR KENNETH R. PARENT 1300 WILSON BLVD. #400 ARLINGTON, VA 22209	☐ Change X ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	EVP DIGBY, KENT S 1300 WILSON BLVD., SUITE 400 ARLINGTON, VA 22209	XX Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	EVSD FROST, THOMAS E 1300 WILSON BLVD., SUITE 400 ARLINGTON, VA 22209	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TREASURER NICHOLAS MCDONOUGH 1300 WILSON BLVD. #400 ARLINGTON, VA 22209	☐ Change XX ☐ Addition

CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Thomas E Frost THOMAS E. FROST, EVP 4.14.03 (703) 526-5115
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #