

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # F00000005562**

1. Entity Name

ASBURY INVESTMENTS, INC.**FILED**
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90054 005 ***150.00

044390

Principal Place of Business

**201 RUSSELL AVENUE
GAITHERSBURG MD 20877**

Mailing Address

**201 RUSSELL AVENUE
GAITHERSBURG MD 20877**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

**F & L CORP.
200 LAURA STREET
JACKSONVILLE FL 32202**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

DO NOT WRITE IN THIS SPACE

4. FEI Number **52-1708574**

Applied For

Not Applicable

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

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 **P** ☐ Delete
NAME **THOMAS, EDWIN C III**
STREET ADDRESS **201 RUSSELL AVENUE**
CITY-ST-ZIP **GAITHERSBURG MD 20877**TITLE **S** ☐ Delete
NAME **KAPLAN, PEGGY C ESQUIRE**
STREET ADDRESS **201 RUSSELL AVENUE**
CITY-ST-ZIP **GAITHERSBURG MD 20877**TITLE **T** ☐ Delete
NAME **BRADSHAW, LAWRENCE B**
STREET ADDRESS **201 RUSSELL AVENUE**
CITY-ST-ZIP **GAITHERSBURG MD 20877**TITLE **C** ☐ Delete
NAME **ROSBOROUGH, JAMES F JR M.D.**
STREET ADDRESS **14429 PETTIT WAY**
CITY-ST-ZIP **POTOMAC MD 20854**TITLE **D** ☐ Delete
NAME **COOK, DANIEL**
STREET ADDRESS **2862 JOHNSON FERRY ROAD**
CITY-ST-ZIP **MARIETTA GA 30062-5635**TITLE **D** ☐ Delete
NAME **MILLER, JERRY ESQ.**
STREET ADDRESS **6404 IVY LANE, SUITE 400**
CITY-ST-ZIP **GREENBELT MD 20770**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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: *Paul Bl...*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)