

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 91168 005 ***150.00

DOCUMENT # F01000001635
1. Entity Name
FIRST MARYLAND PERSONNEL SERVICES INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 110 S. PACA STREET Suite, Apt. #, etc. MAIL CODE 109-620 City & State BALTIMORE MD		3. Mailing Address Suite, Apt. #, etc. City & State	
Zip 21201	Country US	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 52-1998538	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name CSC THE UNITED STATES CORPORATION COMPANY	
Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET	
SUITE 105	
City TALLAHASSEE	FL Zip Code 32301

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

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back)

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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	DIRECTOR BRIAN L. KING 25 S. CHARLES STREET BALTIMORE, MD 21203	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIRECTOR, TREASURER ROBERT L. CARPENTER, JR. 110 S. PACA STREET BALTIMORE, MD 21201	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIRECTOR, PRESIDENT TAYLOR FOSS 25 S. CHARLES STREET BALTIMORE, MD 21203	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SVP D. JILL STRIDER 25 S. CHARLES STREET BALTIMORE, MD 21203	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SECRETARY JEROME RATLIFF 25 S. CHARLES STREET BALTIMORE, MD 21203	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ASSISTANT SECRETARY GREGORY K. THORESON 25 S. CHARLES STREET BALTIMORE, MD 21203	TITLE 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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Jerome A. Ratliff* 5/01/02 410-244-4431
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)