## FILED May 04, 2005 8:00 am Secretary of State 05-04-2005 90125 040 \*\*\*\*61.25

Date

Daytime Phone #

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			_	 	 		

SIGNATURE: \_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1. Entity Nam	MENT # F01000		0.3			1.23				
Principal Plac 5211 AUTH I SUITLAND, M	ROAD									
2. Principal P	lace of Business	ling Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			03072005 Chg	J-NP CR2	2E037 (10/03)		
City & State			y & State			4. FEI Number 52-1993760			olied For Applicable	
Zip	Country	Country			5. Certificate of State		\$8.75 Add Fee Required			
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent Name					
NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4					Street Address (P.O. Box Number is Not Acceptable)					
WESTON, FL 33331				City				FL Zip Code	•	
	named entity submits this staten	nent for the purpo	ose of changing its	registered office	or register	ed agent, or both, in th	<u> </u>		and accept	
the obligat	ions of registered agent.									
SIGNATURE.	Signature, typed or printed name of registers	ed agent and title il app	icable. (NOTE	: Registered Agent sign:	ature required	when reinstating}	DA	ATE	<del></del> ]	
Filing Fee is \$61.25  Due by May 1, 2005  9. Election Campaign Frust Fund Contribut					\$5.00 May Be Added to Fees		heck payable to spartment of St			
10.		ND DIRECTORS		11.	, , , ,	ADDITIONS/CHANGES	TO OFFICERS AN			
NAME STREET ADDRESS CITY-ST-ZIP	D STATON, JAMES D 5211 RUTH RD. SUITLAND, MD 20746	Delete	NAME STREET ADDRESS CITY-ST-ZIP		attoched list		☐ Change	Addition		
†ITLE	Đ		☐ Oelete	TITLE	+	<del> </del>	<del> </del>	☐ Change	Addition	
NAMÉ	_							- cuange		
STREET ADDRESS	MOONEY, KERRY F 5211 RUTH RD.			NAME Street address				create		
STREET ADDRESS CITY-ST-ZIP	MOONEY, KERRY F 5211 RUTH RD. SUITLAND, MD 20746		Dates	NAME STREET ADORESS CITY-ST-ZIP					Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MOONEY, KERRY F 5211 RUTH RD. SUITLAND, MD 20746 D COPE, CHARLOTTE C 5211 RUTH RD.		□ Delete	NAME Street address				☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME	MOONEY, KERRY F 5211 RUTH RD. SUITLAND, MD 20746 D COPE, CHARLOTTE C		□ Defete	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS					Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MOONEY, KERRY F 5211 RUTH RD. SUITLAND, MD 20746 D COPE, CHARLOTTE C 5211 RUTH RD. SUITLAND, MD 20746 D DEAN, RICHARD M 5211 RUTH RD.	EL W		NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS				☐ Change		
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby condicated of the cof	MOONEY, KERRY F 5211 RUTH RD. SUITLAND, MD 20746 D COPE, CHARLOTTE C 5211 RUTH RD. SUITLAND, MD 20746 D DEAN, RICHARD M 5211 RUTH RD. SUITLAND, MD 20746 D BROWN-JOHNSON, HAZE 5211 RUTH RD. SUITLAND, MD 20746 D NORTON, BO 5211 RUTH RD.	ed with this filing eport is true and e empowered to	Defete  Defete  Defete  Defete	NAME STREET ADDRESS CITY-SY-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP THE exemption stry signature shall as required by Cl	ated in Se	same legal effect as if r	made under oath; th that my name appe	Change  Change  Change  Change	Addition  Addition  Addition  formation or director Block 11 if	

Affachment 40081122

# F31000009814

## Armed Forces Veterans Homes Foundation

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(301) 899-8386

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