

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 07, 2006 8:00 am**  
**Secretary of State**

04-07-2006 90032 026 \*\*\*150.00

**DOCUMENT # F01000003895**

1. Entity Name  
**CAR MOM INC.**



Principal Place of Business  
**8270 GREENSBORO DR.  
SUITE 950  
MC LEAN, VA 22102**

Mailing Address  
**8270 GREENSBORO DR.  
SUITE 950  
MC LEAN, VA 22102**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03162006

Chg-P

CR2E034 (11/05)

4. FEI Number

**54-1926018**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525**

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PCEO  
ECKERT, THOMAS D  
8270 GREENSBORO DR., STE 950  
MCLEAN, VA 22102** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
ECKERT, THOMAS D  
8270 GREENSBORO DR., STE 950  
MCLEAN, VA 22102** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SVA  
FERRIERO, JAY M  
8270 GREENSBORO DR., STE 950  
MCLEAN, VA 22102** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VCFO  
KAY, DAVID S  
8270 GREENSBORO DR., STE 950  
MCLEAN, VA 22102** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**AS  
POTTS, CATHERINE  
9270 GREENSBORO DR, STE 950  
MCLEAN, VA 22102** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VSD  
WEAVER, JOHN M  
8270 GREENSBORO DR., STE 950  
MCLEAN, VA 22102** ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**President  
Francis X. Tansing  
8270 Greensboro Dr., Suite 950  
McLean VA 22102** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Exec. Vice President & Secretary  
David Lustki  
8270 Greensboro Dr., Suite 950  
McLean VA 22102** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Debra Summers  
Vice President & Treasurer & Director  
8270 Greensboro Dr., Suite 950  
McLean VA 22102** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Vice President & Asst. Sec.  
Jean Marie Apruzzese  
8270 Greensboro Dr., Suite 950  
McLean VA 22102** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Director  
Kern Burne  
8270 Greensboro Dr., Suite 950  
McLean VA 22102** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Sr. Vice President & Asst. Sec.  
Paul McGUON  
8270 Greensboro Dr. Suite 950  
McLean VA 22102** ☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

*Jean Marie Apruzzese* **Jean Marie Apruzzese** **3-06**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Vice President Date

**703**  
**288-3075**  
Daytime Phone #