

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # F02000001916

1. Entity Name
NEW SINGELTARY, INC.



Principal Place of Business
1101 30TH STREET, N.W., FOURTH FLOOR
WASHINGTON, DC 20007

Mailing Address
1101 30TH STREET, N.W., FOURTH FLOOR
WASHINGTON, DC 20007



04082004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
52-2300996

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	PS
NAME	WHITMAN, WILLIAM L
STREET ADDRESS	1101 30TH STREET, N.W., FOURTH FLOOR
CITY-ST-ZIP	WASHINGTON, DC 20007
TITLE	VTD
NAME	MELKONIAN, MARILYN
STREET ADDRESS	1101 30TH STREET, N.W., FOURTH FLOOR
CITY-ST-ZIP	WASHINGTON, DC 20007
TITLE	V
NAME	HYSON, GREG
STREET ADDRESS	1101 30TH STREET, N.W., FOURTH FLOOR
CITY-ST-ZIP	WASHINGTON, DC 20007
TITLE	AS
NAME	BALDWIN, WILLIAM A
STREET ADDRESS	1101 30TH STREET, N.W., FOURTH FLOOR
CITY-ST-ZIP	WASHINGTON, DC 20007
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: William A Baldwin, Asst. Sec'y 4/8/04 202-333-8447
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #