

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004482

FILED  
Jan 03, 2012  
Secretary of State

**Entity Name:** THE UNIVERSITY OF MARYLAND FOUNDATION, INC.

**Current Principal Place of Business:**

3300 METZEROTT ROAD  
ADELPHI, MD 20783

**New Principal Place of Business:**

**Current Mailing Address:**

3300 METZEROTT ROAD  
ADELPHI, MD 20783

**New Mailing Address:**

**FEI Number:** 52-1125663

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: SD  
Name: PINKARD, ROBERT M  
Address: 2001 PENNSYLVANIA AVE NW STE 800  
City-St-Zip: WASHINGTON, DC 20006

Title: VPOF  
Name: PURCELL, PAMELA  
Address: 3300 METZEROTT RD  
City-St-Zip: ADELPHI, MD 20783

Title: TD  
Name: WRAASE, DENNIS R  
Address: 6714 HONESTY DRIVE  
City-St-Zip: BETHESDA, MD 20817

Title: P  
Name: RALEY, LEONARD  
Address: 3300 METZEROTT RD  
City-St-Zip: ADELPHI, MD 20783

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PAMELA PURCELL

VPOF

01/03/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date