

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005 8:00 am
Secretary of State

04-26-2005 90185 033 ****61.25

DOCUMENT # F03000005831

1. Entity Name
AMERIDREAM REDEVELOPMENT, INC.



Principal Place of Business
**18310 MONTGOMERY VILLAGE AVE., 3RD FLOOR
GAITHERSBURG, MD 20879**

Mailing Address
**18310 MONTGOMERY VILLAGE AVE., 3RD FLOOR
GAITHERSBURG, MD 20879**

14000118



04192005 Chg-NP CR2E037 (10/03)

4. FEI Number
52-2145694

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**BAND, GREG S
C/O LEVEN, TANNENBAUR, ET AL
SARASOTA, FL 34236**

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 fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **ASHBURN, ANN**
STREET ADDRESS **11658 WOODLEA**
CITY-ST-ZIP **WAYNESBORO, PA 17268**

TITLE ☐ Delete
NAME **NEWMAN, ROBERT**
STREET ADDRESS **3735 17TH PLACE, N.E.**
CITY-ST-ZIP **WASHINGTON, DC 20018**

TITLE ☐ Delete
NAME **PARKER-PEREZ, CAROL**
STREET ADDRESS **4007 WINDWARD DRIVE**
CITY-ST-ZIP **MAOUNT AIRY, MD 21771**

TITLE ☐ Delete
NAME **CARMODY, THOMAS H**
STREET ADDRESS **8 SUMMIT AVENUE**
CITY-ST-ZIP **HULL, MA 02045**

TITLE ☒ Delete
NAME **LITCHFIELD, MICHAEL A**
STREET ADDRESS **3316 TUDOR COURT**
CITY-ST-ZIP **ADAMSTOWN, MD 21710**

TITLE ☐ Delete
NAME **COTTON, THOMASENIA**
STREET ADDRESS **1415 N. BROAD STREET**
CITY-ST-ZIP **PHILADELPHIA, PA 191223323**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition
NAME **D Larry Wilson**
STREET ADDRESS **18310 Montgomery Village Ave, 3rd Fl**
CITY-ST-ZIP **Gaithersburg, Maryland 20979**

TITLE ☐ Change ☐ Addition
NAME **D Willie Gault**
STREET ADDRESS **18310 Montgomery Village Ave., 3rd Fl.**
CITY-ST-ZIP **Gaithersburg, Maryland 20879**

TITLE ☐ Change ☐ Addition
NAME **D Mark Stiles**
STREET ADDRESS **18310 Montgomery Village Ave., 3rd Fl.**
CITY-ST-ZIP **Gaithersburg, Maryland 20879**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 617, 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:

Ann Ashburn

Ann Ashburn April 19, 2005 (301)977-9133

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #