2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004819

Entity Name: VAN SCOYOC ASSOCIATES, INC.

SCHIPPEREIT, MERRIE

WASHINGTON, DC 20001

101 CONSTITUTION AVE NW STE 600 W

Name:

Address:

City-St-Zip:

FILED Jul 08, 2008 Secretary of State

Current Principal Place of Business:			New Principal P	New Principal Place of Business:	
101 CONSTITUTION AVE NW STE 600 W WASHINGTON, DC 20001			SUITE 600 WES	101 CONSTITUTION AVE NW SUITE 600 WEST WASHINGTON, DC 20001	
Current M	lailing Addre	ss:	New Mailing Ad	New Mailing Address:	
101 CONSTITUTION AVE NW STE 600 W WASHINGTON, DC 20001			101 CONSTITUTION AVE NW SUITE 600 WEST WASHINGTON, DC 20001		
FEI Number	: 52-1710923	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Addre	Name and Address of New Registered Agent:	
TAMPA, F		S	purpose of changing its regi	stered office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Ager			jent	Date	
		93(2)(b), F.S., the corporation did r	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	VAN SCOYOC	JTION AVE NW STE 600 W	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VAN SCOYOC	JTION AVE NW STE 600 W	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	BUCKLEY, JAI	JTION AVE NW STE 600 W	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	Т () Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: H. STEWART VAN SCOYOC CP 07/08/2008