

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 29 PM 3: 20

DOCUMENT # F93000003141 (9)

1. Corporation Name

E. C. ERNST, INC.

Principal Place of Business

3320 VINELAND ROAD, SUITE B
ORLANDO FL 32811

Mailing Address

3320 VINELAND ROAD, SUITE B
ORLANDO FL 32811

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/02/1993

3a. Date of Last Report

04/13/1994

4. FBI Number

52-1820629

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

State Apt # etc

State Apt # etc

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATE SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (Typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when authorized)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P
NAME	WORCH, RUDOLPH C
STREET ADDRESS	STAR ROUTE
CITY, ST, ZIP	VALLEY LEE MD 20692
TITLE	V
NAME	BOOZE, THOMAS M
STREET ADDRESS	131 OLIVE BRANCH DRIVE
CITY, ST, ZIP	STEVENSVILLE MD 21666
TITLE	ST
NAME	HEGARTY, JAMES
STREET ADDRESS	1050 DIAMOND DRIVE
CITY, ST, ZIP	CHURCHTON MD 20733
TITLE	CD
NAME	BUTCHER, MCBEE
STREET ADDRESS	4601 FORBES BLVD., SUITE 120
CITY, ST, ZIP	LANHAM MD 20708
TITLE	D
NAME	BUTCHER, HOWARD IV
STREET ADDRESS	4601 FORBES BLVD., SUITE 120
CITY, ST, ZIP	LANHAM MD 20708
TITLE	D
NAME	BUTCHER, JONATHAN
STREET ADDRESS	4601 FORBES BLVD., SUITE 120
CITY, ST, ZIP	LANHAM MD 20708

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *James J. Hegarty* JAMES J. HEGARTY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-15-95 (301) 350-7770
DATE SIGNATURE