## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DOCUMENT # F9300003500 (6

1. Corporatio	MEN 1 # F9300C ROPERTIES, INC. OF DELA	003500 (6) Ware				
Principal Plac	Principal Place of Business Malling Address				T 100/160 (1/10 fb/od 14/14 00/44 00/44 00/44 00/44	<b>88100</b> 19101 01111 00111 0011 1001
DEPT. 924.13		10400 FERNWOOD RD		<b>[</b>		
062		DEPT 72.862		DO NOT WRITE IN TH	ווי פטאטב	
BETHESDA MD 20817-1109 US		BETHESDA MD 20817 US			3. Date Incorporated or Qualified	15 SPACE
1		00			07/30/1993	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		52-1822042	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27			5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
Zip	Country	Zip	Country		Trust Fund Contribution	Added to Fees
24	25	<b>⊢</b> ` ⊢	30	,	<ol><li>This corporation owes or has paid the Personal Property Tax due June 30.</li></ol>	current year Intangible  Ses No
24]	9, Name and Address of Current		301		10. Name and Address of New Registers	
TH	E PRENTICE-HALL CORPORATIO		81	Name		
	OI HAYS ST	it Oloiwan nio.	82	Street Ad	odress (P.O. Box Number is Not Acceptable)	<del></del> -
109				Oliebi rio	Juliess (1.0. Dox Hullings is 1401 Acceptable)	
	LLAHASSEE FL 32301		83			
			84	City		85 Zip Code
					<b>__F</b>	<b>L.</b>
SIGNATURE	Signature typed or printed name of registered agei	it and title d'applicable (NOTE:			orporation submits this statement for the purpose ration's board of directors. I hereby accept the a quired when reinstating)  DATE ADDITIONS/CHANGES TO OFFICERS A	
12.	OFFICENS AINL				ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	PAMELA J. MURCH		1.1 TITLE 1.2 NAME			
STREET ADDRESS	10400 FERNWOOD ROAD			T ADDRESS		
CITY-ST-ZIP	BETHESDA MD	BETHEODA AND		ST-ZIP		
TITLE	VASD	DELETE	21 TrTLE			Change Addition
NAME	TOWNSEND, C G		2 2 NAME			
STREET ADDRESS	10 PARAMUS COURT		2.3 STREET	1 ADDRESS		
CITY-ST-ZIP	NORTH POTOMAC MD		2.4 CITY-	ST-ZiP		
TITLE	OP	DELETE	3.1 TITLE			Change Addition
NAME	PARSONS, ROBERT E JR.		3.2 NAME			
STREET ADDRESS	5 PARAMUS COURT		3.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	NORTH POTOMAC MD	□ O£LÉTE	3.4 CITY-ST-ZIP 4.1 TITLE			Change Addition
NAME	WARDINSKI, BRUCE D	الم مدورة	4. 2 NAME			Clausido Claudoco
STREET ADDRESS	10400 FERNWOOD ROAD		4.2 NAME  4.3 STREET ADDRESS			
CITY-ST-ZIP	BETHESDA MD		4.4 CITY - ST - ZIP			
TITLE	EV	DELETE	5.1 TITLE	· · ·		Change Addition
NAME	CHRISTOPHER J. NASSETTA		5.2 NAME			
STREET ADDRESS	AAAAA MARAAAAAA MAAA		5.3 STREET	T ADDRESS		
CITY-ST-ZIP	BETHESDA MD		5.4 CITY-S	ST - ZIP		
TITLE	AS	DELETE	6.1 TITLE		· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME	WALLACE SUSAN		6.2 NAME			
STREET ADDRESS	PRESS 10400 FERNWOOD ROAD 6.3		6.3 STREET	I ADDRESS		

14. Thereby 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 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:

3/17/98 (301) 380-9000

**FILED** 

Mar 31 1998 8:00am

Secretary of State