

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 14 PM 2:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F93000004217 (6)

1. Corporation Name

HOGAN STANTON PROPERTIES, INC.

Principal Place of Business

Mailing Address

**WORLD TRADE CENTER, SUITE 900
NORFOLK VA 23510**

**WORLD TRADE CENTER, SUITE 900
NORFOLK VA 23510**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/16/1993

3a. Date of Last Report

06/01/1994

4. FBI Number

54-1169373

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

Suite, Apt. #, etc.

Suite, 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

**THE PRENTICE-HALL CORPORATION SYSTEM INC
1201 HAYES STREET
STE 105
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 constituting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PO
NAME	BUCKLE, STEWART H III
STREET ADDRESS	1300 EMORY PLACE
CITY - ST - ZIP	NORFOLK VA 23509
TITLE	VS
NAME	FINN, JULIE S
STREET ADDRESS	900 WORLD TRADE CENTER
CITY - ST - ZIP	NORFOLK VA
TITLE	CD
NAME	STANTON, ROBERT M
STREET ADDRESS	WORLD TRADE CENTER, SUITE 900
CITY - ST - ZIP	NORFOLK VA 23510
TITLE	T
NAME	MIKUTA, MARK
STREET ADDRESS	900 WORLD TRADE CENTER
CITY - ST - ZIP	NORFOLK VA
TITLE	V
NAME	ADIE, JULIE R
STREET ADDRESS	900 WORLD TRADE CENTER
CITY - ST - ZIP	NORFOLK VA
TITLE	V
NAME	DANE, DANA
STREET ADDRESS	900 WORLD TRADE CENTER
CITY - ST - ZIP	NORFOLK VA

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	PD
1.3 STREET ADDRESS	MIKUTA MARK
1.4 CITY - ST - ZIP	900 WORLD TRADE CENTER
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	VPT
2.3 STREET ADDRESS	ADIE JULIE
2.4 CITY - ST - ZIP	900 WORLD TRADE CENTER
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	VPS
4.3 STREET ADDRESS	COTE, JOHN
4.4 CITY - ST - ZIP	900 WORLD TRADE CENTER
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:

Mark Mikuta

MARK MIKUTA, PRES.

Date

3/30/95 8046270661

SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

Daytime Phone #