

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F94000000370 (6)

1. Corporation Name

CRS FINANCIAL MANAGEMENT, INC.



Principal Place of Business

Mailing Address

10474 ARMSTRONG ST.
FAIRFAX VA 22030

10474 ARMSTRONG ST.
FAIRFAX VA 22030

3. Date Incorporated or Qualified

01/25/1994

3a. Date of Last Report

01/23/1995

2. Principal Place of Business

2a. Mailing Address

21 10340 Democracy Lane

26 10340 Democracy Lane

4. FEI Number

54-0905897

Applied For

Not Applicable

Suite, Apt. #, etc.

22 Suite 300

Suite, Apt. #, etc.

27 Suite 300

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23 Fairfax, VA

City & State

28 Fairfax, VA

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

24 22030

Country

Zip

29 22030

Country

g. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS ST., 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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME BURSTEIN, MICHAEL L.
STREET ADDRESS 10474 ARMSTRONG ST.
CITY-ST-ZIP FAIRFAX VA

1.1 TITLE P/T/D ☒ Change ☐ Addition

12 NAME
13 STREET ADDRESS 10340 Democracy Lane, Suite 300
14 CITY-ST-ZIP Fairfax, VA 22030

TITLE V ☒ DELETE

NAME BOGGS, RONALD E.
STREET ADDRESS 10474 ARMSTRONG ST.
CITY-ST-ZIP FAIRFAX VA 22030

2.1 TITLE ☐ Change ☐ Addition

22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

TITLE S ☐ DELETE

NAME GARBER, EVERETT M III
STREET ADDRESS 10474 ARMSTRONG ST.
CITY-ST-ZIP FAIRFAX VA 22030

3.1 TITLE V/S ☒ Change ☐ Addition

32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

TITLE T ☒ DELETE

NAME WEEKS, JAMES A
STREET ADDRESS 10474 ARMSTRONG ST.
CITY-ST-ZIP FAIRFAX VA 22030

4.1 TITLE ☐ Change ☐ Addition

42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

SEE ATTACHED ADDITIONS:
(DIRECTORS)

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/15/96

(703) 934-6472

Date

Daytime Phone #

CR2E034 (12/95)

ATTACHMENT TO ANNUAL REPORT

STATE OF Florida (1996)

ITEM 12

The names and addresses of additional Directors of Capital Recovery Service, Inc. not shown on the preformatted form, are:

Title	C
Name	Robert M. Blumenfeld
Address	575 Madison Ave., Ste. 1006, NY, NY 10022

Title	D
Name	James M. Conlon
Address	Metro Center, One Station Place, Stamford, CT 06902

Title	C
Name	Paul W. Durrant
Address	Metro Center, One Station Place, Stamford, CT 06902

Title	D
Name	David J. Mathies, Jr.
Address	Metro Center, One Station Place, Stamford, CT 06902