2000 UNIFORM BUSINESS REPORT (UBR)

FHEDDOCUMENT # **F9400000370** Apr 25, 2000 8:00 am Secretary of State CRS FINANCIAL MANAGEMENT, INC. 04-25-2000 90093 047 ***150.00 Mailing Address Principal Place of Business 10340 DEMOCRACY LANE 10340 DEMOCRACY LANE SUITE 300 ISTE 300 FAIRFAX VA 22030 FAIRFAX VA 22030-2518 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 54-0905897 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS ST., STE, 105 TALLAHASSEE FL 32301 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE. (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. SELRETARY TREASURER DIRECTOR Change ☐ Addition **PSTD** TITLE **⊠** Delete GARBER, EVERETT M III NAME NAME GARBER, EVERETT M. III STREET ADDRESS 10340 DEMOCRACY LANE, STE. 300 STREET ADDRESS 10340 DEMOCRACY LANE , STE SOD CITY-ST-ZIP CITY-ST-ZIP FAIRFAX VA FAIRPAX VA 22030 ☐ Change M Delete ☐ Addition TITLE NAME MATHIES, DAVID J JR -NAME STREET ADDRESS STREET ADDRESS METRO CENTER, ONE STATION PLACE CITY-ST-ZIP CITY-ST-ZIP STAMFORD CT Change ☐ Addition ☐ Delete TITLE TITLE NAME CONLON, JAMES M. NAME STREET ADDRESS STREET ADDRESS METRO CENTER, ONE STATION PLACE CITY-ST-ZIP CITY-ST-ZIP STAMFORD CT ☐ Addition ☐ Defete TITLE TITLE NAME weeks. Pamela j NAME STREET ADDRESS STREET ADDRESS 10340 DEMOCRACY LANE, STE. 300 CITY-ST-ZIP CITY-ST-ZIP FAIRFAX VA ☐ Change Addition D Delete TITLE NAME NAME KIARSIS, VICTOR STREET ADDRESS STREET ADDRESS METRO CENTER, ONE STATION PLACE CITY-ST-ZIP CITY-ST-ZIP STAMFORD CT PRESIDENT ☐ Change 🗹 Addition □ Delete TITLE TITLE NAME ANDY G. TRICULES STREET ADDRESS STREET ADDRESS 10340 DEMOCRACY LANZ, STE 300 CITY-ST-ZIP FAIRFAX, VA 22030

13. I hereby 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 report or supplemental 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE SIGNATURE AND TOPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SULLE EVERETIM GARBERT SCOTY

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703 934-6472

Daytime Phone #

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