

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F94000000370

FILED
Apr 29, 2002 8:00 AM
Secretary of State

Entity Name: CRS FINANCIAL MANAGEMENT, INC.

Current Principal Place of Business:

10340 DEMOCRACY LANE
STE 300
FAIRFAX, VA 22030 US

New Principal Place of Business:

Current Mailing Address:

10340 DEMOCRACY LANE
SUITE 300
FAIRFAX, VA 22030 US

New Mailing Address:

FEI Number: 54-0905897

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS ST., STE. 105
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:	T	() Delete
Name:	MAY, JIM	
Address:	10340 DEMOCRACY LANE, STE. 300	
City-St-Zip:	FAIRFAX, VA 22030	
Title:	D	() Delete
Name:	CONLON, JAMES M.	
Address:	METRO CENTER, ONE STATION PLACE	
City-St-Zip:	STAMFORD, CT	
Title:	AS	() Delete
Name:	WEEKS, PAMELA J	
Address:	10340 DEMOCRACY LANE, STE. 300	
City-St-Zip:	FAIRFAX, VA	
Title:	D	() Delete
Name:	KIARSIS, VICTOR	
Address:	METRO CENTER, ONE STATION PLACE	
City-St-Zip:	STAMFORD, CT	
Title:	P	() Delete
Name:	TRICULES, ANDY G	
Address:	10340 DEMOCRACY LANE SUITE 300	
City-St-Zip:	FAIRFAX, VA 22030	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	() Change () Addition
Name:	
Address:	
City-St-Zip:	
Title:	() Change () Addition
Name:	
Address:	
City-St-Zip:	
Title:	S (X) Change () Addition
Name:	WEEKS, PAMELA J
Address:	10340 DEMOCRACY LANE, STE. 300
City-St-Zip:	FAIRFAX, VA
Title:	() Change () Addition
Name:	
Address:	
City-St-Zip:	
Title:	() Change () Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES N. MAY

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04/29/2002

Electronic Signature of Signing Officer or Director

Date