

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F94000003643 (3)

1. Corporation Name

BCI OF VIRGINIA INC.



Principal Place of Business

5160 PARKSTONE DR., STE. 190
CHANTILLY VA 22021-3813

Mailing Address

5160 PARKSTONE DR., STE. 190
CHANTILLY VA 22021-3813

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

06/27/1994

3a. Date of Last Report

03/14/1995

4. FEI Number

54-1117771

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE FL 32031

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 C
NAME TICKLE, B.A.
STREET ADDRESS 211 ACACIA AVE.
CITY-ST-ZIP ROCKCLIFFE, ONTARIO, CANADA ☒ DELETE

TITLE D
NAME DANIELS, W.J.
STREET ADDRESS 1030 BOSQUE CRESCENT
CITY-ST-ZIP CUMBERLAND, ONTARIO, CANADA ☒ DELETE

TITLE D
NAME DONAHEE, G.R.
STREET ADDRESS 2416 MISSISSAUGA ROAD
CITY-ST-ZIP MISSISSAUGA, ONTARIO, CANADA ☐ DELETE

TITLE DP
NAME KIPP, R.R.
STREET ADDRESS 15058 STILLFIELD PLACE
CITY-ST-ZIP CENTREVILLE VA ☐ DELETE

TITLE V
NAME MORTON, D.K.
STREET ADDRESS 15461 MEHERRIN DR.
CITY-ST-ZIP CENTREVILLE VA ☒ DELETE

TITLE ST
NAME JELLET, C. D
STREET ADDRESS P O BOX 276 N/A
CITY-ST-ZIP PHILOMONT VA ☒ DELETE

1.1 TITLE C
1.2 NAME P. FORIEL DESTETZET
1.3 STREET ADDRESS 4, RUE LOUIS GUERIN
1.4 CITY-ST-ZIP 69626 VILLEUR BANNE CEDEX, FRANCE ☐ Change ☒ Addition

2.1 TITLE V
2.2 NAME S.A. BERRY
2.3 STREET ADDRESS 285 FERN LEAF CRESCENT
2.4 CITY-ST-ZIP ORLEANS, ONTARIO K1E2Z5 ☐ Change ☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE V
5.2 NAME R.E. COMRIE
5.3 STREET ADDRESS 6303 LEE FOREST PATH
5.4 CITY-ST-ZIP CENTREVILLE, VA 22020 ☐ Change ☒ Addition

6.1 TITLE S.
6.2 NAME C.K. MILLER
6.3 STREET ADDRESS 6132 BEACHWAY DRIVE
6.4 CITY-ST-ZIP FALLS CHURCH, VA 22041 ☐ Change ☒ Addition

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 118.07(3)(b), 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

Date

Daytime Phone #

CR2E034 (12/95)