

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 # F94000004733 (1)

1. Corporation Name

HMC ACQUISITION PROPERTIES, INC.



Principal Place of Business

DEPT. 72/862
10400 FERNWOOD ROAD
BETHESDA MD 20817

Mailing Address

DEPT. 72/862
10400 FERNWOOD ROAD
BETHESDA MD 20817

3. Date Incorporated or Qualified

09/13/1994

3a. Date of Last Report

04/18/1995

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

4. FEI Number

52-1888825

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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
110 NORTH MAGNOLIA ST.
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

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

| | | |
|----------------|-------------------------|--|
| TITLE | VDP | <input checked="" type="checkbox"/> DELETE |
| NAME | BOLLEBACH, STEPHEN F | |
| STREET ADDRESS | 1555 35TH ST. NW | |
| CITY- ST- ZIP | WASHINGTON DC | |
| TITLE | VD | <input checked="" type="checkbox"/> DELETE |
| NAME | HART, MATTHEW J | |
| STREET ADDRESS | 8801 WATTS MINE TERRACE | |
| CITY- ST- ZIP | POTOMAC MD 20854 | |
| TITLE | SV | <input type="checkbox"/> DELETE |
| NAME | TOWNSEND, C.G. | |
| STREET ADDRESS | 10 PARAMUS COURT | |
| CITY- ST- ZIP | GAITHERSBURG MD | |
| TITLE | AS | <input type="checkbox"/> DELETE |
| NAME | WALLACE, SUSAN E | |
| STREET ADDRESS | 25 BUSH HILL COURT | |
| CITY- ST- ZIP | GAITHERSBURG MD 20882 | |
| TITLE | T | <input type="checkbox"/> DELETE |
| NAME | PARSONS, ROBERT E JR. | |
| STREET ADDRESS | 5 PARAMUS COURT | |
| CITY- ST- ZIP | NORTH POTOMAC MD 20878 | |
| TITLE | D | <input checked="" type="checkbox"/> DELETE |
| NAME | MARRIOTT, RICHARD E | |
| STREET ADDRESS | 18040 PLEASANT HILL DR. | |
| CITY- ST- ZIP | POTOMAC MD 20854 | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | | |
|--------------------|-------------------------|--|
| 1.1 TITLE | SP/T | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 1.2 NAME | Scott A. LaPorta | |
| 1.3 STREET ADDRESS | 10400 Fernwood Road | |
| 1.4 CITY- ST- ZIP | Bethesda, MD 20817-1109 | |
| 2.1 TITLE | V/D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 2.2 NAME | Stephen J. McKenna | |
| 2.3 STREET ADDRESS | 10400 Fernwood Road | |
| 2.4 CITY- ST- ZIP | Bethesda, MD 20817-1109 | |
| 3.1 TITLE | SV/S | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME | | |
| 3.3 STREET ADDRESS | | |
| 3.4 CITY- ST- ZIP | | |
| 4.1 TITLE | V/AS | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 4.2 NAME | Pamela J. Murch | |
| 4.3 STREET ADDRESS | 10400 Fernwood Road | |
| 4.4 CITY- ST- ZIP | Bethesda, MD 20817-1109 | |
| 5.1 TITLE | P/D | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME | | |
| 5.3 STREET ADDRESS | | |
| 5.4 CITY- ST- ZIP | | |
| 6.1 TITLE | AS | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 6.2 NAME | David E. Reichmann | |
| 6.3 STREET ADDRESS | 10400 Fernwood Road | |
| 6.4 CITY- ST- ZIP | Bethesda, MD 20817-1109 | |

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

Susan E. Wallace

4/18/96

(301) 380-9000

Date

Daytime Phone #

CR2E034 (12/95)