

## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORAT REINSTATEN	is the later of the second	Secretar	RTMENT OF STATE ry of State corporations		SEENETARY OF STATE ALLAHASSES, TOUGH	
DOCUMEN  1. Corporation Name  BETAC CORPO	T#_F9000006322 <b>T94 00000 6</b> DRATION	322	À	i		
Principal Office Address - No P.O. Box #     2001Beauregard Street		3. Mailing Office Address 6801 Rockledge Drive		40	0237578634 🧪	
Suite, Apt. #, etc.		Suite, Apt. #, etc. MP-213		4. Date Incorpo	crated or Qualified (12/10/1004	
City & State Alexandria, VA		City & State Bethesda, MD		5. FEI Number	Applied For	
<sup>Zip</sup> 22311	Country USA	Zip 20817	Country USA	6	OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status	
Name Corporation Service Company Street Address (P.O. Box Number is Not Acceptable) 1201 Hays Street Suite, Apt. #, Etc.  City Tallahassee  7. Name and Address of Current Registered Agent  Street Registered Agent  Street Agent  Street Address (P.O. Box Number is Not Acceptable)  1201 Hays Street  State  FL 32301					REINSTATEMENT 04-12	
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.  Signature of Registered Agent Date HIP III						
9. Names and Street A	ddresses of Each Officer and	d/or Director (Florida nonpr	ofit corporations must list at le	east 3 directors)		
Titles	Name of Officers and/or Directors		Street Address of Eac Officer and/or Directo		City / State / Zip	
See Lis	t Attached					
					JUL 1 8 2012	
10. E-mail Address: Dehorah R. Gallagher@Imco.com (To be used for future annual report not					J. BOILE	
reinstatement applications owed by the corporations are the corporations and the corporations are the corporation are the co	ation, the reason for dissolution tion have been paid. I further am aware that rese informat	iver or trustee empowered in has been eliminated, the certify, the information indiction submitted in a document of the certify.	to execute this application as corporate name satisfies the cated on this application is true	provided for in chap requirements of sec e and accurate, and constitutes a third de Emens 0	oter 607 or 617, F.S. I further certify that when filling this stion 607.0401 or 617.0401, F.S., and that all fees my signature shall have the same legal effect as egree felony as provided for in s 817.155, F.S. 6/26/12 856-486-5179  Date Daytime Phone #	

## **BETAC CORPORATION – Directors and Officers**

Name	Title	Address
Gooden, Linda R.	Director and President	700 N. Frederick Ave Gaithersburg, MD 20879
MacKay, Scott W.	Director, Vice President and Secretary	700 N. Frederick Ave Gaithersburg, MD 20879
Stanislav, Martin T.	Director and Vice President, Finance and Assistant Treasurer	700 N. Frederick Ave Gaithersburg, MD 20879
Cole, Glenn E.	Assistant Secretary (Tax)	6801 Rockledge Drive Bethesda, MD 20817
Emens, Christina	Assistant Secretary	2339 Route 70 West Cherry Hill, NJ 08002-3315
Heywood, David A.	Assistant Secretary (Tax)	6801 Rockledge Drive Bethesda, MD 20817
Martin, Donald P.	Assistant Secretary (Tax)	230 E. Mall Boulevard Bldg 100, Room U4632 King of Prussia, PA 19406