## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

F95000002096 (4)

CRICO OF ORLANDO, INC.

Principal Place of Business Mailing Address							- 10031000 INTO FOIDT ATTITUDE BATTI SO	III <b>Ga</b> il <b>Ga</b> il III II Gal	0 10110 DILL 1001
			1200 ROCKVILLE PIKE OCKVILLE MD 20852						
TO STATE OF THE SHOOT			THE IND LOVE				DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualified		
A Drivernal D	lead of Divisions	On Mailing	Address				<b>04/28/1995 4.</b> FEI Number		Applied For
—	lace of Business	2e. Mailing Address					APPLIED FOR 57	1937529	Applied For Not Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.						¢p.7	5 Additional
22		27					5. Certificate of Status Desired	1 1	Required
City & State	6	City & State					6. Election Campaign Financing		00 May Be
23		28					Trust Fund Contribution	☐ Add	ed to Fees
Zip	Country	Zip		Cou	intry		8. This corporation owes or has pa		Intangible No
24	25   Current	29 Pagistared Ar		30			Personal Property Tax due June  10. Name and Address of New Re		_ UND
9. Name and Address of Current Registered Agent					81	Name	10. Hanne gra reactors of front fro	gistoros rigori.	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD								<del></del>	
PLANTATION FL 33324					82	Street Addre	ss (P.O. Box Number is Not Acceptab	ile)	
· ·	ANIAMON I E SOULT				83				•
•					84	City		<b></b> 85 Z	Zip Code
•						•		FL.	
<ol> <li>Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was authoria agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida S</li> </ol>						the corporation	oration submits this statement for the pon's board of directors. I hereby accept	rurpose of changin of the appointment	g its registered as registered
SIGNATURE									
	Signature, typed or printed name of registered agent		e (NOT		d Ager	nt signature required		DATE	FORD IN 40
12.	OFFICERS AND		DELETE	13. 1.1 Ti	TI C	Т	ADDITIONS/CHANGES TO OFFIC	Chan	
TITLE NAME	WILLOUGHBY, H. WILLIAM	'	order	1.2 NA		İ		CT Officery	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
STREET ADDRESS	11200 ROCKVILLE PIKE					ADDRESS			
CITY-ST-ZIP	ROCKVILLE MD 20852				TY- \$1	•			
TITLE	VP		DELETE	2.1 TU				☐ Chan	ge 🔲 Addition
NAME	CAMPBELL, SUSAN			2.2 N/	ME	i			
STREET ADDRESS	11206 ROCKVILLE PIKE		1	2.3 \$1	REET	ADDRESS			
City-St-ZIP	ROCKVILLE MD	,		2.4 C	ITY-S	T-ZIP	<u> </u>		
TITLE	D		DELETE	3.1 TI	TLE			L Chan	ge 🔲 Addition
NAME	SMALL, JAMES C			3.2 N		1			
STREET ADDRESS	11200 ROCKVILLE PIKE					ADDRESS			
CITY-ST-ZIP	ROCKVILLE MD		DELETE	3.4 C		T-ZIP		Chane	ge
TITLE	AS   Jackson, Elijah L			4.1 TC 4. 2 N				C Official A	Jo Addition
NAME Street address	11200 ROCKVILLE PIKE					ADDRESS			
CITY-ST-ZIP	ROCKVILLE MD 20852				TY-S1				
TRILE	AS		DELETE	5.1 TI		- 24		Chan	ge Addition
NAME	MYRICK, KEVIN			5.2 NA					
STREET ADDRESS	11200 ROCKVILLE PIKE			5.3 \$1	REET	ADDRESS			
CITY-ST-ZIP	POCKVILLE NO .	)		5.4 CI	TY- ST	I - ZIP			
TITLE	DIRECTOR OF TAXATOO		DELETE	6.1 TI	TLE			☐ Chan	ge Addition
NAME	RANDOLALLEE MANDOLANIA PIL. ROCKUSILE, M. J. L.	.0		6.2 NA	ME				
STREET ADDRESS	Too reflexing	~- ~~~		6.3 \$1	REET	ADDRESS			
CITY - ST - ZIP	ROCKUITE, MY, 20	1852		6.4 CI	TY - ST	i-ZIP		<del></del>	

14. 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 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 chapter for an attachment with an address.

**FILED** 

Mar 24 1998 8:00am

Secretary of State