1. Entity Name

Mailing Address

3. Mailing Address

10400 FERNWOOD ROAD

SUITE 500. DEPT. 72/923

BETHESDA MD 20817-1109

6903 Rockledge Drive

HMH REALTY COMPANY, INC.

Principal Place of Business

10400 FERNWOOD ROAD SUITE 500

BETHESDA MD 20817-1109

2. Principal Place of Business

6903 Rockledge Drive

Suite, Apt. #, etc. **Suite** 1500 City & State

1201 HAYS STREET

TALLAHASSEE FL 32301

Bethesda, Maryland Country 20817-1818

USA

THE PRENTICE-HALL CORPORATION SYSTEM, INC.

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

Suite, Apt. #, etc Suite 1500 City & State

Bethesda, Maryland

20817-1818 6. Name and Address of Current Registered Agent

Country

USA

5. Certificate of Status Desired

4. FEI Number

Street Address (P.O. Box Number is Not Acceptable)

Fee Required 7. Name and Address of New Registered Agent

DATE

CHECK HERE IF MAKING CHANGES

FILED

Apr 28, 2003 8:00 am Secretary of State

04-28-2003 91297 041 ***150.00

52-1928293

City Zip Code

8.	The above named entity submits this statement for the purpose of changing its registered off	fice or registered agent, or	both, in the State of Florida.	am familiar with, a	and accept
	the obligations of registered agent.				

SIGNATURE

SUITE 105

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Applied For

\$8.75 Additional

Not Applicable

10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Addition TITLE ☐ Delete NASSETTA, CHRISTOPHER J NAME NAME 6903 Rockledge Dr. #1500 10400 FERNWOOD ROAD STREET ADDRESS STREET ADDRESS BETHESDA MD Bethesda, MD 20817-1818 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition Wallace, Susan e NAME NAME STREET ADDRESS 10400 FERNWOOD ROAD STREET ADDRESS 6903 Rockledge Dr. #1500 BETHESDA MD 20817-1109 CITY-ST-ZIP CITY-ST-ZIF Bethesda, MD 20817-1818 VP/Director **VPDT** TITLE X Change ☐ Addition TITLE ☐ Delete WALTER, W. EDWARD NAME NAME 6903 Rockledge Dr. #1500 STREET ADDRESS 10400 FERNWOOD ROAD STREET ADDRESS Bethesda, MD 20817-1818 CITY-ST-ZIP BETHESDA MD 20817 CITY-ST-ZIP VΡ ☐ Addition TITLE TA Change TITLE. ☐ Delete FREEMAN, BONNIE NAME NAME 6903 Rockledge Dr. #1500 STREET ADDRESS 10400 FERNWOOD ROAD STREET ADDRESS Bethesda, MD 20817-1818 CITY-ST-ZIP BETHESDA MD 20817-1109 CITY-ST-7IP SECRETARY 🔼 Delete **VDS** TITLE TITI F Tal Change Addition BUCKLEY, DAVID L. 6803 Rockledge Dr. #1500 NAME PARSONS, ROBERT E JR NAME STREET ADDRESS 10400 FERNWOOD RD STREET ADDRESS Bethesda, MD 20817-1818 CITY-ST-ZIP BETHESDA MD 20817-1109 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

NAME

STREET ADDRESS

CITY-ST-7IP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

4/17/03

Date

(240) 744-1000

Daytime Phone #