

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

FILED

Feb 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F96000001584 (9)**

1. Corporation Name

FORUM GROUP II, INC.



Principal Place of Business

**MARRIOTT DR
DEPT. 924.13
WASHINGTON DC 20058
US**

Mailing Address

**MARRIOTT DR
DEPT 924.13
WASHINGTON DC 20058
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/26/1996

4. FEI Number

35-1517525

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 owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 **10400 Fernwood Road**

Suite, Apt. #, etc.

22

City & State

23 **Bethesda MD**

Zip

24 **20817**

Country

25

2a. Mailing Address

26 **MARRIOTT DR**

Suite, Apt. #, etc.

27

City & State

28 **Bethesda MD**

Zip

29 **20817**

Country

30

9. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

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, type or printed name of registered agent and firm, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

NAME **PAUL E JOHNSON, JR**
STREET ADDRESS **MARRIOTT DR, DEPT 924.13**
CITY-ST-ZIP **WASHINGTON DC**

1.2 TITLE ☐ DELETE

NAME **VP**
STREET ADDRESS **TERRENCE P MORROW**
CITY-ST-ZIP **MARRIOTT DR, DEPT 924.13**
WASHINGTON DC

1.3 TITLE ☐ DELETE

NAME **VP**
STREET ADDRESS **WILLIAM J SHAW**
CITY-ST-ZIP **MARRIOTT DR, DEPT 924.13**
WASHINGTON DC

1.4 TITLE ☐ DELETE

NAME **S**
STREET ADDRESS **JOAN RECTOR MCGLOCKTON**
CITY-ST-ZIP **MARRIOTT DRIVE, DEPT 924.13**
WASHINGTON DC

1.5 TITLE ☐ DELETE

NAME **AS**
STREET ADDRESS **JEFF B STANT**
CITY-ST-ZIP **MARRIOTT DRIVE, DEPT 924.13**
WASHINGTON DC

1.6 TITLE ☐ DELETE

NAME **AS**
STREET ADDRESS **NANCY L BENZ**
CITY-ST-ZIP **MARRIOTT DRIVE, DEPT 924.13**
WASHINGTON DC

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME **10400 Fernwood Road**
1.3 STREET ADDRESS **Bethesda, MD 20817**
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME **S**
2.3 STREET ADDRESS **Terrence P. Morrow**
2.4 CITY-ST-ZIP **10400 Fernwood Road**
Bethesda, MD 20817

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME **10400 Fernwood Rd**
3.3 STREET ADDRESS **Bethesda MD 20817**
3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME **10400 Fernwood Rd**
4.3 STREET ADDRESS **Bethesda MD 20817**
4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME **10400 Fernwood Rd**
5.3 STREET ADDRESS **Bethesda MD 20817**
5.4 CITY-ST-ZIP

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME **10400 Fernwood Rd**
6.3 STREET ADDRESS **Bethesda MD 20817**
6.4 CITY-ST-ZIP

14. 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 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:

Nancy L Benz

2/2/98

CR2E034 (10/97)