

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000001928

Entity Name: REZNICK GROUP, P.C.

FILED
Jan 19, 2009
Secretary of State

Current Principal Place of Business:

7700 OLD GEORGETOWN RD
STE 400
BETHESDA, MD 20814

New Principal Place of Business:

Current Mailing Address:

7700 OLD GEORGETOWN RD
STE 400
BETHESDA, MD 20814

New Mailing Address:

FEI Number: 52-1088612 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: REZNICK, DAVID CPA
Address: 12103 GREENLEAF AVE
City-St-Zip: POTOMAC, MD 20854

Title: P () Delete
Name: REZNICK, DAVID CPA
Address: 12103 GREENLEAF AVE
City-St-Zip: POTOMAC, MD 20854

Title: S () Delete
Name: SILVERMAN, IVAN CPA
Address: 14821 BAUER DRIVE
City-St-Zip: ROCKVILLE, MD 20853

Title: O () Delete
Name: BAGGETT, KENNETH E CPA
Address: 370 WEMBLEY CIRCLE
City-St-Zip: ATLANTA, GA 30328

Title: O () Delete
Name: KANIS, LESTER A CPA
Address: 20 PEBBLE RIDGE CT
City-St-Zip: POTOMAC, MD 20854

Title: O () Delete
Name: BECK, MICHAEL C CPA
Address: 4355 BURGESS HILL LANE
City-St-Zip: ALPHARETTA, GA 30202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: SILVERMAN, IVAN CPA
Address: 5750 BOU AVENUE, APT. 1008
City-St-Zip: NORTH BETHESDA, MD 20852

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID REZNICK

P

01/19/2009

Electronic Signature of Signing Officer or Director

_____ Date