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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATES

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # 1. Corporation Name

Principal Plac	e of Business 3. 10400 FERNWOOD RD	Mailing Address DEPT 52.924.13. 10400 FERN	WOOD RD		
BETHESDA MO		BETHESDA MD 20817		3. Date Incorporated or Qualified	3a. Date of Last Report
L	lace of Business	2a. Mailing Address		08/22/1996 4. FEI Number 52-1997472	Applied For
		26 Suite, Apt. #, etc.			\$8.75 Additional Fee Required
City & Stat		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25 9, Name and Address of Currer	Zip 29 30	Country	8. This corporation has liability for int Florida Statutes 10. Name and Address of New Regi	Yes No
	PRENTICE-HALL CORPORATION 1 HAYS STREET		81 Name 82 Street A	ddress (P.O. Box Number is Not Acceptable	
I .	LAHASSEE FL 32301		83	occost (1.0. Box Hallison to Not Pocoplastic	"
44 Buryot	to the previous of Continue 607 BEC	12 and 607 1509 Eloyida Statutas	84 City	corporation submits this statement for the pu	FL 85 Zip Code
office or r agent. Fa	registered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was aut	horized by the corp	oration's board of directors. I hereby accept	the appointment as registered
SIGNATURE	Signature, typed or printed name of registered age	ent and little if applicable (NOTE: F ID DIRECTORS	Registered Agent signature r	equired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE PS AND DIRECTORS IN 12
TOLE	DP	DELETE	1.1 TITLE	ADDITIONS FIANCES TO STITLE	Change Addition
NAME	BRADLEY, C STEPHEN		1.2 NAME		
STREET ADDRESS	1807 CYRSTAL LAKE DR		1.3 STREET ADORESS		
CHTY-ST-ZIP THILE	LAKELAND FL 33801 DV	DELETE	14 CITY-ST-ZIP 21 TITLE		☐ Change ☐ Addition
NAME	LOVE, WILLIAM J		2.2 NAME		
STREET ADDRESS	1807 CYRSTAL LAKE DR		2.3 STREET ADDRESS		
CITY-ST ZIP	LAKELAND FL 33801		2.4 CITY-ST-ZIP		
TOTLE	DST	☐ DELETE	3.1 TITLE		Change Addition
NAME AVOICE ADDRESS S	WILSON, TRACEY A 1807 CYRSTAL LAKE DR		3.2 NAME		
STREET ADDRESS CITY-ST-ZIP	LAKELAND FL 33801		3.3 STREET ADDRESS 3.4. CITY+ST-ZIP		
TITLE	8	DELETE	-	AS	X Change
NAME	STANT, JEFF B		4.2 NAME	A3	
STREET ADDRESS	717 N OAKLAND ST		4.3 STREET ADDRESS		
CITY-ST-ZIF	ARLINGTON VA 22203	C COURT	4.4 CITY - ST - ZIP		IVI Obassa - File distant
TITLE	S Benz, Nancy L	☐ DELETE	51 TITLE	ÁS	Change Addition
NAME STREET ADDRESS	9132 WILLOWGATE LN		5.2 NAME 5.3 STREET ADDRESS		
City-St-ZiP	POTOMAC MD 20854		5.4 CITY-ST-2IP		
TILLE		DELETE	64 7171 6	\$	Change X Addition
NAME				JOAN RECTOR MCGLOCKTON	

6.3 STREET ADDRESS
CITY-ST-ZIP

6.4 CITY-ST-ZIP

1. I do 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 application in the receiver 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,

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS



APR 2 3 1997

380-1233

FILED

May 06 1997 8:00am

Secretary of State