## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **Secretary of State DOCUMENT # F96000005339** 03-16-2004 90023 012 \*\*\*150.00 FLORIDA-CRC CORP. Principal Place of Business Mailing Address 94030489 1427 CLARKVIEW ROAD 1427 CLARKVIEW ROAD SUITE 500 SUITE 500 BALTIMORE, MD 21209-2100 BALTIMORE, MD 21209-2100 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03032004 Cha-P CR2E034 (10/03) Applied For City & State City & State 4. FEI Number 52-0738521 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NAPLES LAWDOCK, INC. Street Address (P.O. Box Number is Not Acceptable) 4501 TAMIAMI TRAIL NORTH SUITE 300 NAPLES, FL 34103-3060 City Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delete TITLE Change ☐ Addition LUETKEMEYER, JOHN A JR NAME NAME 1427 Clarkview Rd. Suite 500 STREET ADDRESS 17 W. PENNSYLVANIA AVE., STE 500 STREET ADDRESS CITY-ST-ZIP TOWSON, MD 21204 CITY-ST-ZIP Baltimore, MD 21209 TITLE ☐ Delete TITLE Change ☐ Addition NAME SCHAPIRO, J. MARK NAME 1427 Clarkview Rd. Suite 600 STREET ADDRESS 17 W. PENNSYLVANIA AVE STREET ADDRESS CITY-ST-ZIP **TOWSON, MD 21204** CITY-ST-7IP POSIG OM, MO 21209 VAS TITLE ☐ Delete ☐ Addition TITLE NAME KINNEAR, JR. W NAME 1427 Clarkview Rd. Suite 500 STREET ADDRESS 17 W. PENNSYLVANIA AVE STREET ADDRESS CITY-ST-ZIP **TOWSON, MD 21204** CITY-ST-ZIP Baltimore, MD 21209 TITLE ☐ Delete TITLE RIEF, LAWRENCE G NAME NAME 1427 Clarkview Ra. Suite 500 STREET ADDRESS 17 W. PENNSYLVANIA AVE STREET ADDRESS CITY-ST-ZIP **TOWSON, MD 21204** CITY-ST-ZIP Baitimore, MD 21209 TITLE ☐ Delete TITLE SCHAPIRO, J.M. III NAME NAME 1427 Clarkview Rd. Suite 500 STREET ADDRESS 17 W. PENNSYLVANIA AVE. STREET ADDRESS CITY-ST-ZIP TOWSON, MD 21204 CITY-ST-ZIP Baltmore, MD 21209 ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP -CITY-ST-ZIP

FILED Mar 16, 2004 8:00 am

12. I hereby certify that the information supplied with this filling 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.

SIGNATURE: WILLIAM WILLIAM N. KINNEAU, Jr 3/8/09 410-296-4800