**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## **FILED** Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90182 018 \*\*\*150.00

DOCUMENT #	F9600000551	9
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1. Corporatio BROWN	ASHLEY CREEK II, INC.					ļ						
Principal Plac	ipat Place of Business Mailing Address					-	{		IN <b>BO</b> IN <b>BB</b> IR			##   UII   U#I
225 E. REDWOOD ST BALTIMORE MD 21202  225 E. REDWOOD ST BALTIMORE MD 21202				DO NOT WRITE IN THIS SPA						SPACE		
						_	<ol> <li>Date Incorporated of 10/24/1996</li> </ol>	r Qualifed				
2. Principal P	face of Business	2a. Mailing Address					4. FEI Number				Appl	ied For
21		26					52-1852705			[]	Not .	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			.,		5. Certifcate of Status	Desired			5 Ad Req	lditional uired
City & Stat	е	City & State					6. Election Campaign Trust Fund Contribu	_				lay Be Fees
Zip	Country 25	Zip <b>29</b>	Cour	ntry			This corporation ow Personal Property T		ent year Int	tangible X Yes		]No
	9. Name and Address of Current	t Registered Agent	_'				10. Name and Address	s of New I	Registered	Agent		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD			L	81 82	Name Street A	t Address (P.O. Box Number is Not Acceptable)						
PLANTATION FL 33324		Ì	83			· · · · · · · · · · · · · · · · · · ·	<del></del>					
				84	City				FL	-	Zip Co	
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State om m familiar with, and accept the obligat	of Florida. Such change was au	thorized	by t	-named of the corpo	corpora ration's	ation submits this statem s board of directors. I he	ent for the reby acce	purpose of of the appoi	changing ntment a	its regi	egistered stered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE:	Pegistered /	Acient	eionature re	rouited wi	hen reinstating)		DATE			
12.		D DIRECTORS	13.	-90111	. s.g.iaiora (e		ADDITIONS/CHANG	ES TO OF		ND DIREC	CTOR	S IN 12
TITLE	PCD					PD					X Change ☐ Add	
NAME	PRUGH, JOHN M		12 NAME			PR	UGH, JOHN M.					
STREET ADDRESS	225 E. REDWOOD ST						25 EAST REDWOOD STREET					
CITY-ST-ZIP	BALTIMORE MD						LTIMORE, MD					
TITLE	VD	☐ DELETE	_	1.4 CITY-ST-ZIP			ALTIMORE, MD 21202			☐ Chan	ge	Addition
NAME	BANCROFT, PETER E		2.2 NA	ME								
STREET ADDRESS	225 E. REDWOOD ST				ADDRESS							
CITY-ST-ZIP	BALTIMORE MD		2. 4 CD		}							

TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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 changes, or on an attachment with an address, with all other like empowered.

3.1 TITLE

3.2 NAME

4.1 TITLE

4.2 NAME

5.1 TITLE 5.2 NAME

6.1 TITLE

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

VSD

HALL, TERRY F.

225 EAST REDWOOD STREET

BALTIMORE, MD 21202

SIGNATURE:

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

HALL, TERRY F

BALTIMORE MD

**BALTIMORE MD** 

225 E. REDWOOD ST

GISRIEL, TIMOTHY M

225 E. REDWOOD ST

Timothy M. Gisriel Treasurer

DELETE

□ DELETE

☐ DELETE

□ DELETE

(410) 727-4083

CR2E034 (11/98)

☐ Addition

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