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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1**9**98

DOCUMENT # F9600006137 (1)

FILED May 13 1998 8:00am Secretary of State

AMERIC	CAN OPERATIONS CORPOR	NATION	,				(16 2)(1) (3 31 (14) (4) (4)
Principal Place of Business Mailing Address				· · · · · · · · · · · · · · · · · · ·			
1420 SPRING HILL ROAD. STE 300 1420 SPRING HILL ROAD. MCLEAN VA 22102 MCLEAN VA 22102			AD. STE 300				
		WOLLSHIP THE ELIPE				DO NOT WRITE IN THIS	SPACE
		•				3. Date Incorporated or Qualified	
6 Drive in al O	2. Principal Place of Business 28. Mailing Address					11/22/1996	
21 Principal P						4. FEI Number	Applied For
	Suite, Apt. #, etc. Suite, Apt. #, etc.					54-1589253	Not Applicable
22						5. Certificate of Status Desired	\$8.75 Additional Fee Required
		City & State				6. Election Campaign Financing	\$5.00 May Be
		28	28			Trust Fund Contribution	Added to Fees
Zip	Country Zip		Countr	Country		8. This corporation owes or has paid the cu	
24			30	0		Personal Property Tax due June 30.	Yes X No
	6. Name and Address of Current	· · · · · · · · · · · · · · · · · · ·	81	T		10. Name and Address of New Registered	Agent
CORPORATION SERVICE COMPANY				Name			
1201 HAYS STREET			82	82 Street Address (P.O. Box Number is Not Acceptable)			
[IAI	LLAHASSEE FL 32301-2525		63				
			63				
·			84	Cily	FL 85 Zip Code		
11. Pursuant I	and 607,1508, Florida Statu	rtes, the abov	e-named	corpo	ration submits this statement for the purpose on's board of directors. I hereby accept the app	f changing its registered	
agent. La	m familiar with, and accept the obliga	tions of, Section 607.0505, I	lorida Statute	S.	portitio	in a board or directors. Thereby accept the app	Jointinent as registered
SIGNATURE							
12.	Signature, typed or pointed name of registered agen OFFICERS AND	··· - · · · · · · · · · · · · · · · · ·	It : Hegistered Ag	ent signaturi	e roquired	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	DIRECTORS IN 42
TITLE	DELETE						
NAME MCCARTHY, JAMES K			1.2 NAME	12 NAME 13 STREFT ADDRESS 1420 S Pring Hill Road, Such 300			
STREET ADDRESS 1420 SPRING HILL RD., STE 300			1.3 STREE	1.3 STREFT ADDRESS		1208 pring Hill Road	, 3000
CITY-ST-ZIP	MCLEAN VA		1.4 CHY-5	ST-ZIP	Mc	Lian, VA 22-107-	
TITLE	V DELETE		21 TITLE	21 TIME 3.7			☐ Change ☑ Addition
NAME	FOY, C ALLAN			2.2 NAME Tol		nnson, Harry R Rd #300	,
STREET ADDRESS				2.3 STREET ADDRESS 147		20 Spring Hill has	
CITY-ST-ZIP	MCLEAN VA	,	2. 4 CITY-	ST-ZIP	m	Lean, VA 27.107	
TITLE	V DELETE		3.1 THLE		Ă	urtney, Clemon G south ,	Change Addition
NAME expect toopsee	GEESEY, EDWIN P 1420 SPRING HILL RD., STE 300		3.2 NAME	3.2 NAME CC		o 5 Point Drive South +	HISO
STREET ADDRESS	AAOL CANLLEA					cksonville, FL 32216	
CITY-ST-ZIP TITLE	ST ST	DELETE	3.4 CITY- 4.1 TITLE	S1 - ZIP	JOAC	3000	Change Addition
NAME	FIELD, GINA L	(1) otter	4.7 TITLE 4. 2 NAME				C change C Monthold
STREET ADDRESS	4444 455144 1111 1111 1111			4.3 STREET ADDRESS			
CITY-ST-ZIP	MCLEAN VA		4.4 CITY - S				
TITLE	7	DELETE	51 TITLE		 		Change Addition
NAME	Berrigan, Kevin M		5 2 NAME				
STREET ADDRESS	ADDRESS 1420 SPRING HILL RD., STE 300		5.3 STREET	5.3 STREET ADDRESS			
CITY-ST-ZIP	MCLEAN VA		5.4 CITY - 5	5.4 CITY - S1 - ZIP			
TITLE	CD	☐ DELETE	6.1 TITLE				Change Addition
NAME	FIELD, L F		G.2 NAME				
STREET ADDRESS	1420 SPRING HILL RD., STE 3	00	6.3 STREET	ADDRESS	•		
CITY-ST-ZIP	MCLEAN VA		6.4 CITY-S	1. IP			

14. Thereby 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 account in all that my signature shall have the same logal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee employee of the 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

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