## Uniform Business Report (UBR)

SIGNATURE

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

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DOCUMENT# F9600006499  LENTIN NAME OF LANCE  DEL MAR VILLAGE (NC.)						FILED 03 JUL 28 PM 3: 39			
Principal Place of Business  5454 WISCONSIN AVENUE. SUITE 1265  CHEVY CHASE MD 20815  Mailing Address 5454 WISCONSIN AVENU CHEVY CHASE MD 2081							SECRETARY OF STALLAHASSEE FLO		
2. Principal Place of Susiness 3. Mailing Addre			SS				a constium tion ander weste mbate muite un	FAT BERNE BESSE WANDS MEN	18 18118   IB11   IB <b>9</b> 1
Suita. Apt	. #. etc.	Suite. Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
City & Sta	te	City & State				4. FE	Number 52-1971740		Applied For Not Applicable
Zip	Country Zip		Coun	Country		5. Ce	rtificate of Status Desired [	\$8.75 A	ditional
	6. Name and Address of Currer	at Registered Agent	<u> </u>			7 Na	me and Address of New Regis		
				Name		71.110	THE STATE AND ALL STATE OF THE	torea Agent	
	RVICES, INC.			Street Address (P.O. Box Number is Not Acceptable)				<del></del>	
	r Park ave. Ssee Fl 32301	•	•						<u>.</u>
TABLE IN		•		City	City Zig Code			de )	
<u>-</u>								FL 40 Co	
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature Registered Agent Registered Agent Signature Registered Agent Signature Registered Agent Signature Registered Agent							Election Campaign Financin     Trust Fund Contribution.	☐ Adde	O May Be d to Fees
10.	" OFFICERS AND	DIRECTORS	11.			ADDI	TIONS/CHANGES TO OFFICER	S AND DIRECTOR	IS IN 11
TITLE MAME STREET ADORESS CITY-ST-ZIP	RUBIN, MICHAEL D 5454 WISCONSIN AVENUE, SUITE 1265		9	í		0	90002216 8/08/030103802	□ Change 5219 23 **150.	Addition
TITLE HAME STREET ADDRESS CITY-ST-ZIP	LYONS, BRUCE D 5454 WISCONSIN AVENUE, SUITE 1265		27	3				☐ Change	☐ Addition
TITLE Name Street address City-St-Zip	DELAPEYROUSE, ROBERT 5454 WISCONSIN AVENUE, SUITE 1265		Ħ	- 1				☐ Change	Addition
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ntle Name Staeet 4007658 Dity-51-219		☐ Deleta	TITLE HAME STREET	FADDRESS				☐ Changa	Addition
771.5 \$4177 \$207555 \$1774-\$17-\$17		☐ Gelete	H	T ACCRESS 57-37				☐ Change	C Adathon
12. I hereby o	ertify that the information supplied with on this report or supplemental regard	n this filing does not qualify for s true and accurate and that n	r tne exen ny signatu	notion state and shall ha	d in Section	ion 119 me lega	07(3)(i). Fiorida Statutes, I funti I effect as if made under cath: 1	er certify (nat the )	riormation or altestor

## CAPITOL INVESTMENT ASSOCIATES CORPORATION

July 25, 2003

Secretary of State State of Florida Division of Corporations 406 E. Gaines Street Tallahassee FL 32399

Subject: Replacement 2003 Uniform Business Report and Check

Del Mar Village, Inc.

Dear Sir or Madam:

Earlier this month we sent in the 2003 Uniform Business Reports together with a check for \$550. This included a penalty of \$400. However as we had not received this report before, we would like to request that the penalty be waived. In order to expedite this process, we have stopped payment on the original check and hereby submit a copy of the report and a check in the amount of \$150.

Please call me at 301-951-8811 x 19 if you need any further information.

Sincerely,

Lester S. Steinfeld Chief Financial Officer