2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F9700001437						Apr 18, 2000 8:00 am Secretary of State					
MORI SP	C CORP.						cretary 1-18-2000 9026			2	
Principal Place	•	Mailing Address			-		110 2000 3020		.50.00		
10400 FERNWOOD RD. DEPT 52.924.13 BETHESDA MD 20817		10400 FERNWOOD RD. DEPT 52.924.13 BETHESDA MD 20817-1109					n i	11#D1) į		
2. Principal Place of Business		3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE						
City & State		City & State		4. F	El Number	52-2022396			pplied For of Applicable		
Zip	Country	Zip	Country				f Status Desired	Fee	.75 Add Require		
	6. Name and Address of Curren	t Registered Agent	Nar	me	7. 1	lame and A	ddress of New Re	gistered Age	<u>nt</u>		
1201	PRENTICE-HALL CORPORATION HAYS STREET AHASSEE FL 32301	SYSTEM, INC.		eet Address	ddress (P.O. Box Number is Not Acceptable)						
			City	/				FL	Zip Cod	e	
8. The above	named entity submits this statement	for the purpose of changing its	s registered office	ce or registe	red ag	ent, or both,	in the State of Flori	da.			
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable (NO	TE: Registered Agent	signature require	ed when re	instating)		DATE			
Tax filing r	oration is eligible to satisfy its Intangib equirement and elects to do so. ria on back)	After MAY 1, 2		e \$550.00	ate		tion Campaign Fina Fund Contribution			May Be to Fees	
11.	OFFICERS AN	D DIRECTORS	12.		AD	DITIONS/C	HANGES TO OFFIC	CERS AND DI	RECTORS	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WEISZ, STEPHEN P 10400 FERNWOOD RD BETHESDA MD 20817	☐ Delete	TITLE NAME STREET ADDR	1 1] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MCGLOCKTON, JOAN RECTOR 10400 FERNWOOD RD BETHESDA MD 20817	□ (* Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	4	1040	00 FERI	AVID MANN NWOOD ROAD MD. 2018	·	Change	☐ Addition	
TITLE NAME STREET AODRESS CITY-ST-ZIP	DV RYAN, JOSEPH 10400 FERNWOOD RD BETHESDA MD 20817	Ø Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	RESS	M. 1	LESTER	PULSE JR. NWOOD ROAD MD. 208	T.) Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV KIMBALL, KEVIN M 10400 FERNWOOD RD BETHESDA MD 20817	☐ Delete	TITLE NAME STREET ADDR						Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLIST, TODD 10400 FERNWOOD RD BETHESDA MD 20817	☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BENZ, NANCY L 10400 FERNWOOD RD BETHESDA MD 20817 certify that the information supplied wi	☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	RESS	lootics	110.07/01/1	Florida Statuton] Change	Addition	

indicated on this report or supplies with this limit does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. Flurinar 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: NANCY L. BENZ 4/14 05 (301) 380-8742

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #