

FILED
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90153 005 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F97000002433			
1. Corporation Name SPACE IMAGING, INC.			
Principal Place of Business 12076 GRANT ST THORNTON CO 80241 US		Mailing Address 12076 GRANT ST THORNTON CO 80241 US	
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 28 Suite, Apt. #, etc. 27 City & State 28 Zip Country	
3. Date Incorporated or Qualified 05/07/1997		4. FEI Number 77-0382989	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees	
7. This corporation owes the current year intangible Personal Property Tax. ☐ Yes ☐ No		8. This corporation owes the current year intangible Personal Property Tax. ☐ Yes ☐ No	
9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, if the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE: <i>W.R. Harris</i> DATE: 2/3/99			
(NOTE: Registered Agent signature required when replacing)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOD COPPLE, JOHN R 12076 GRANT ST THORNTON CO 80241	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HARRIS, JEFFREY K 12076 GRANT ST THORNTON CO 80241	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT DONALDSON JR, JOHN E 12076 GRANT ST THORNTON CO 80241	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LANGER, RICHARD E 12076 GRANT ST THORNTON CO 80241	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRASHEARS, MELVIN 6801 ROCKLEDGE DRIVE BETHESDA MD	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	THOMAS A. CORCORAN ☒ Change ☐ Addition 6801 ROCKLEDGE DRIVE BETHESDA, MD 20817
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUKE, PHILLIP 6801 ROCKLEDGE DRIVE BETHESDA MD	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

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 has 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 changed, or on an attachment with an address, with all other like empowered.

(SIGNATURE:)

W.R. Harris
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bill GILLETTE
 Bill GILLETTE

John B. Copple
 John B. Copple

4/9/99 303-254-2000
 Date Daytime Phone #

CR2E034 (1/99)