

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 26, 2000 8:00 am**  
**Secretary of State**

05-26-2000 90086 024 \*\*\*150.00

**DOCUMENT # F97000003780**

1. Entity Name  
**FRIT PROPERTY SERVICES, INC.**

Principal Place of Business Mailing Address  
 1626 E. JEFFERSON ST. 1626 E. JEFFERSON ST.  
 ROCKVILLE MD 20852-4041 ROCKVILLE MD 20852-4041

2. Principal Place of Business 3. Mailing Address  
 Suite, Apt. #, etc. Suite, Apt. #, etc.  
 City & State City & State

Zip Country Zip Country

4. FEI Number **52-2030759** Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**



DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**CORPORATION SERVICE COMPANY**  
**1201 HAYS STREET**  
**TALLAHASSEE FL 32301-2525**

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS	
TITLE NAME GUTTMAN, STEVEN J	<input type="checkbox"/> Delete
STREET ADDRESS 1626 E. JEFFERSON ST. CITY-ST-ZIP ROCKVILLE MD 20852-4041	
TITLE NAME D WOOD, DONALD C	<input type="checkbox"/> Delete
STREET ADDRESS 1626 E JEFFERSON ST. CITY-ST-ZIP ROCKVILLE MD 20852-4041	
TITLE NAME D WEAVER, SCOTT	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 5949 SHERRY LANE CITY-ST-ZIP DALLAS TX 75225	
TITLE NAME S HERMAN, NANCY J	<input type="checkbox"/> Delete
STREET ADDRESS 1626 E. JEFFERSON ST. CITY-ST-ZIP ROCKVILLE MD 20852-4041	
TITLE NAME D CONNOR, JEANNE T	<input type="checkbox"/> Delete
STREET ADDRESS 1626 E. JEFFERSON ST. CITY-ST-ZIP ROCKVILLE MD 20852-4041	
TITLE NAME D PATTERSON, THOMAS L	<input type="checkbox"/> Delete
STREET ADDRESS 1626 E. JEFFERSON ST. CITY-ST-ZIP ROCKVILLE MD 20852-4041	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME TREASURER CECILY A. WARD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 1626 E. JEFFERSON ST. CITY-ST-ZIP ROCKVILLE MD 20852-4041	
TITLE NAME PRESIDENT STEVEN J. GUTTMAN	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 1626 E. JEFFERSON ST CITY-ST-ZIP ROCKVILLE, MD 20852-4041	
TITLE NAME VICE PRESIDENT JEANNE T. CONNOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 1626 E. JEFFERSON ST CITY-ST-ZIP ROCKVILLE, MD 20852-4041	
TITLE NAME EXECUTIVE VICE PRESIDENT DONALD C. WOOD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 1626 E. JEFFERSON ST CITY-ST-ZIP ROCKVILLE, MD 20852	
TITLE NAME VICE PRESIDENT THOMAS L. PATTERSON	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 1626 E. JEFFERSON ST CITY-ST-ZIP ROCKVILLE, MD 20852	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further 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: Cecily A. Ward, TREASURER CECILY A. WARD Date 4/27/00 Daytime Phone # (301)998-8000