05-17-2004 09:42am From-RSM McGladrey & Pullen, LLP 301-897-

ANNUAL REPORT (AR)

FILED
Jun 23, 2004 8:00 am
Secretary of State
06-23-2004 90003 002 ***550.00

DOCUMENT # F97000006416

1. Entity Name

HANLEY DEVELOPMENT, INC.

Principal Place of Business	Mailing Address
2808 TARFLOWER WAY NAPLES FL 34105	% ARTHUR J. DYKES 6701 DEMOCRACY BLVD., #600 BETHESDA MD 20817

MOORE CR2E034 (11/03)

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 ~~52-2154646~~ * ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004, Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS HANLEY, C. ROBERT 2808 TARFLOWER WAY NAPLES FL 34105	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HANLEY, MARGARATE 2808 TARFLOWER WAY NAPLES FL 34105	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	HANLEY, MARGARET	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DPT HANLEY, DANIEL D 11325 MANOR STONE DRIVE GERMANTOWN MD 20874	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	13325 MANOR STONE DR	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ May 17, 04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment

DLN: 9700006416 540585

IRS Department of the Treasury
Internal Revenue Service

OGDEN UT 84201-0034

In reply refer to: 0426037494
Feb. 09, 2004 LTR 147C E
65-0797048 200012 02 000 1
02503
BODC: SB

HANLEY DEVELOPMENT INC
% ARTHUR J DYKES CPA
KELLER BRUNER & CO LLC
6701 DEMOCRACY BLVD STE 600
BETHESDA MD 20817

Employer Identification Number: 65-0797048

Dear Taxpayer:

We received your Form 1120S, U.S. Income Tax Return for an S Corporation under employer identification number (EIN) 52-2154646. Our records show you were assigned EIN 65-0797048 so we are processing your tax return using that EIN. You should file using EIN 65-0797048 for any future tax periods.

If you have any questions, please call us toll free at 1-800-829-0115.

If you prefer, you may write to us at the address shown at the top of the first page of this letter.

Whenever you write, please include this letter and, in the spaces below, give us your telephone number with the hours we can reach you. Also, you may want to keep a copy of this letter for your records.

Telephone Number ( )_____ Hours_____

We apologize for any inconvenience we may have caused you, and thank you for your cooperation.

Sincerely yours,

Ms N. Skinner

Ms. N. Skinner
Dept. Manager, Input Correction

Enclosure(s):
Copy of this letter