

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000001051

1. Entity Name  
USOSC HOLDINGS, INC.



FILED  
03 FEB 20 PM 12:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
7500 OLD GEORGETOWN RD  
BETHESDA MD 20814

Mailing Address  
7500 OLD GEORGETOWN RD  
BETHESDA MD 20814

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 94-3282137

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

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. I am familiar with, and accept the obligations of registered agent.

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 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 PD  
NAME IRIBE, P. CHRISMAN ☐ Delete  
STREET ADDRESS 7500 OLD GEORGETOWN RD  
CITY-ST-ZIP BETHESDA MD 20814

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE V  
NAME COOPER, JOHN R ☐ Delete  
STREET ADDRESS 7500 OLD GEORGETOWN RD  
CITY-ST-ZIP BETHESDA MD

TITLE ☐ Change ☐ Addition  
NAME 000012980820  
STREET ADDRESS 02/24/03--01016--009 \*\*3162.50  
CITY-ST-ZIP

TITLE VT  
NAME BASSETT, DAVID N ☒ Delete  
STREET ADDRESS 7500 OLD GEORGETOWN RD  
CITY-ST-ZIP BETHESDA MD

TITLE ☐ Change ☒ Addition  
NAME Assistant Controller  
STREET ADDRESS Mark T. Caron  
CITY-ST-ZIP 7500 Old Georgetown Rd  
Bethesda, Md 20814

TITLE SD  
NAME HARTMAN, SANFORD L ☐ Delete  
STREET ADDRESS 7500 OLD GORGETOWN ROAD  
CITY-ST-ZIP BETHESDA MD 20814

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE AT  
NAME MEY, J. T ☒ Delete  
STREET ADDRESS 7500 OLD GORGETOWN ROAD  
CITY-ST-ZIP BETHESDA MD 20814

TITLE ☐ Change ☒ Addition  
NAME Assistant Treasurer  
STREET ADDRESS Hank A. Coorson  
CITY-ST-ZIP 7500 Old Georgetown Rd.  
Bethesda, MD 20814

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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: *Mark T. Caron*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mark T. Caron  
Assistant Controller 1/30/03 301-280-6800

Date Daytime Phone #

CR2E034 (10/02)