

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90460 001 ***150.00

DOCUMENT # F98000005404

1. Entity Name
DELAWARE MAINSTREET VENTURES, INC.



Principal Place of Business
**1300 WILSON BLVD. #400
ARLINGTON VA 22209**

Mailing Address
**1300 WILSON BLVD. #400
ARLINGTON VA 22209**

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 **54-1913338**

Applied For
Not Applicable

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

☒ CHECK HERE IF MAKING CHANGES

11002400



6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

7. Name and Address of New Registered Agent

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CD
SIEGEL, LAURENCE C
1300 WILSON BLVD. #400
ARLINGTON VA 22209** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
MCMILLAN, PETER B
1300 WILSON BLVD. #400
ARLINGTON VA 22209** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**EVSD
FROST, THOMAS E
1300 WILSON BLVD. #400
ARLINGTON VA 22209** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
NEEB, D. GREGORY
1300 WILSON BLVD. #400
ARLINGTON VA 22209** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**EVP
PARENT, KENNETH R
1300 WILSON BLVD. #400
ARLINGTON VA 22209** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D/P, DEVELOPMENT DIVISION
JAMES F. DAUSCH
1300 WILSON BLVD. #400
ARLINGTON, VA 22209** ☐ Change ☒ Addition

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**EVP, TREASURER
NICHOLAS MCDONOUGH
1300 WILSON BLVD. #400
ARLINGTON, VA 22209** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIRECTOR, CHIEF OPERATING OFFICER ☒ Change ☐ Addition

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: [Signature] REQUIRED

THOMAS PARENT, PRESIDENT OF MAINSTREET VENTURES, INC.

4-14-03

(703) 526-5115

Daytime Phone #

CR2E034 (10/02)