

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2006 8:00 am
Secretary of State

03-29-2006 90119 044 ***150.00

DOCUMENT # F98000006544

1. Entity Name
THE BRICKMAN GROUP, LTD. INCORPORATED



Principal Place of Business
**18227 FLOWERS MILL WAY
GAITHERSBURG, MD 20879**

Mailing Address
**18227 FLOWERS MILL WAY
GAITHERSBURG, MD 20879**

2. Principal Place of Business
18227 Flower Hill Way

Suite, Apt. #, etc.
Suite D

City & State
Gaithersburg MD

Zip
20879

Country
USA

3. Mailing Address
18227 Flower Hill Way

Suite, Apt. #, etc.
Suite D

City & State
Gaithersburg MD

Zip
20879

Country
USA



03152006 Chg-P CR2E034 (11/05)

4. FEI Number
23-2949247

Applied For
Not Applicable

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

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, 2006 Fee will be \$550.00**

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
**PD
BRICKMAN, SCOTT W
18227 FLOWER HILL WAY, STE D.
NEW MARKET, MD 21774** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CD
BRICKMAN, THEODORE W JR
375 S. FLOWERS MILL ROAD
LANGHORNE, PA 19047** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T,V
SILCOX, CHARLES B
375 S. FLOWERS MILL ROAD
LANGHORNE, PA 19047** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VAS
HJELLE, MARK A
18227 FLOWER HILL WAY, STE D.
GAITHERSBURG, MD 20877** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VAS
POLOZIC, STEPHEN
18227 FLOWER HILL WAY, STE D.
GAITHERSBURG, MD 20877** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
NEAL, JACK
375 S. FLOWERS MILL ROAD
LANGHORNE, PA 19047** ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VAS
Stephen Polozic
18227 Flower Hill Way, Ste. D
Gaithersburg, MD 20879** ☒ 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 exemptions contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Stephen Polozic, Vice President

(201) 987-9200