2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F9800006880

Entity Name

CITY-ST-ZIP

SIGNATURE:

MEDALLION INVESTMENT SERVICES, INC.

Principal Place of Business 811 RITCHIE HWY. SEVERNA PARK MD 21146		Mailing Address 81† RITCHIE HWY. SEVERNA PARK MD 21146-4130					
					ប្រមាណក្នុកក្នុកក្នុកក្នុកក្នុកក្នុកក្នុកក្នុ		
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.				ITE IN THIS SPACE	
City & State		City & State		4	1. FEI Number 52-208065	2	Applied For Not Applicable
Zip Country		Zip	Zip Country		i. Certificate of Status Desired	> \$8.7	5 Additional equired
	6. Name and Address of Current	Registered Agent			. Name and Address of New I		, qui ou
	o. Name and Address of Carrott	riegioteico rigent	Na Na	ame	7,000		
PENROSE, KENNETH R 271 53RD CIRCLE				Street Address (P.O. Box Number is Not Acceptable)			
VER	O BEACH FL 32968		Ci	ty		FL Zir	p Code
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 S		be \$550.00	10. Election Campaign Fi Trust Fund Contribution		\$5.00 May Be Added to Fees
			•		ADDITIONS (CHANGES TO GE	EICEDS AND DIDE	CTORS IN 11
11.	OFFICERS AND		12.	l v	ADDITIONS/CHANGES TO OF	FICERS AND DIREC	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PENROSE, KENNETH R 271 53RD CIRCLE			KATHY J. GORDON 228 North Division Street Salisbury, MD. 21801			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CV Delete TIT GARTENHAUS, HOWARD F 9210 CORPORATE BLVD., STE. 240		TITLE NAME STREET ADD CITY-ST-ZI	DRESS 106	V Change M Addition H. Michael Ryan, Jr. 106 Old Padonia Road Hunt Valley, MD. 21030		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST WILSON, RONALD	Celete	TITLE NAME STREET ADD CITY - ST - 21	DRESS		☐ Ch	nange 🗌 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FIN MOULD, JOHN R 811 RITCHIE HWY SEVERNA PARK MD 21146	☐ Delete	TITLE NAME STREET ADD			☐ Ch	nange
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OLYLINA FARA MU 21140	☐ Delete	TITLE NAME STREET ADD CITY-ST-ZI	ľ	,	□ Ch	nange Addition
TITLE NAME		Delete	TITLE NAME STREET ADD	IRESS		☐ Ch	nange Addition

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

FILED

Mar 03, 2000 8:00 am Secretary of State

> 410-544-8400 Daytime Phone #

02/23/00

03-03-2000 90209 002 ***150.00