

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

DOCUMENT # **F99000000211**

02 APR 19 AM 10:15

1. Entity Name
HRD Remainder

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
10275 Little Patuxent Parkway

3. Mailing Address
SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Columbia, MD

City & State

4. FEI Number
52-2067970

Applied For
Not Applicable

Zip
21044

Country
USA

Zip

Country

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

City
Tallahassee FL Zip Code
32301

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.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
(See criteria on back)

**January 1 - May 1, Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	VT Donahue, Jeffrey H 10275 Little Patuxent Parkway Columbia, MD 21044-3456	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S Glenn, Gordon H 10275 Little Patuxent Parkway Columbia, MD 21044-3456	TITLE NAME STREET ADDRESS CITY - ST - ZIP	600005482416--8 -05/07/02--01094--018 *****150.00 *****150.00
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP Hullinger, Elizabeth A 10275 Little Patuxent Parkway Columbia, MD 21044-3456	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	EVP McGregor, Douglas A 10275 Little Patuxent Parkway Columbia, MD 21044-3456	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P Deering, Anthony W 10275 Little Patuxent Parkway Columbia, MD 21044-3456	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP Lundquist, Melanie M 10275 Little Patuxent Parkway Columbia, MD 21044-3456	TITLE NAME STREET ADDRESS 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)(b), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Elizabeth A. Hullinger
Elizabeth A. Hullinger

4/9/02 *410-992-6000*
Date Daytime Phone #

CR2E034B (12/01)