

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 19, 2004 8:00 am**  
**Secretary of State**

04-19-2004 90375 036 \*\*\*150.00

**DOCUMENT # F99000000220**

1. Entity Name  
SDH IV, INC.



Principal Place of Business  
9801 WASHINGTONIAN BLVD  
GAITHERSBURG, MD 20878

Mailing Address  
PO BOX 352  
BUFFALO, NY 14240-0352

**14004803**



04072004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
52-2136389

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525

**DO NOT WRITE  
IN THIS SPACE**

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, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	JONES, LESLIE
STREET ADDRESS	9801 WASHINGTONIAN BLVD
CITY-ST-ZIP	GAITHERSBURG, MD 20878
TITLE	SD
NAME	GROVE, BRIAN
STREET ADDRESS	9801 WASHINGTONIAN BLVD
CITY-ST-ZIP	GAITHERSBURG, MD 20878
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Brian Grove

4/13/04

Date

806-372-8291

Daytime Phone #

Attachment

SDH IV, INC.

14004803  
#F99000000220

EIN: 52-2136389  
State of Incorporation: Delaware

**Directors:**

Leslie Jones  
Brian Grove

**Officers:**

President: Leslie Jones

Secretary/Treasurer: Brian Grove

**Business Address for the Above Named Officers and Directors:**

9801 Washingtonian Blvd.  
Gaithersburg, MD 20878