


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2006 08:00 AM
Secretary of State

DOCUMENT # F99000002765 1. Entity Name HUMPHREY-THOLLANDER CORP.	
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Principal Place of Business 7170 RIVERWOOD DRIVE A COLUMBIA, MD 21046-1245	Mailing Address 7170 RIVERWOOD DRIVE A COLUMBIA, MD 21046-1245
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DO NOT WRITE IN THIS SPACE



04042006 No Chg-P CR2E034 (11/05)

4. FEI Number
52-2171240

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

WRIGHT, KENNETH W ESQ.
20 NORTH ORANGE AVE., SUITE 1000
ORLANDO, FL 32801

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

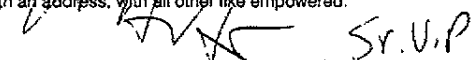
9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

000000541125
05/10/06-80046-003 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C HUMPHREY, JAMES I JR 7170 RIVERWOOD DRIVE, SUITE A COLUMBIA, MD 210461245
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST HOOPER, BETHANY H 7170 RIVERWOOD DRIVE, SUITE A COLUMBIA, MD 210461245
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BARILA, TIMOTHY P 7170 RIVERWOOD DRIVE, SUITE A COLUMBIA, MD 210461245
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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:  Sr. V.P. 4/6/06 443-259-4900