2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Jun 02, 2003 8:00 am Secretary of State

06-02-2003 90188 048 ***550.00

1. Entity Nan	MENT # F99000002 THEY-THOLLANDER CORP.	765		00-02-2003 90188 048 330.00
Principal Plac 7170 RIVERI COLUMBIA, N		Mailing Address 7170 RIVERWOOD DR. COLUMBIA, MD 21046	The state of	90138333
Principal Place of Business 3. Mailing Address		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES
City & State		City & State		4. FEI Number Applied For Not Applied act
Zip	Country	Zip	Country	5. Certificate of Status Desired
	5. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent
WRIGHT, KENNETH W ESQ. 20 NORTH ORANGE AVE., SUITE 1000 ORLANDO, FL 32801			Name Street Address	s (P.O. Box Number is Not Acceptable)
			Oliver Addiess	Sweet Address (F.O. Dox Number 15 Not Acceptable)
	,		City	FL Zip Code
	named entity submits this statement fallons of registered agent.	or the purpose of changing its	registered office or registe	ered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE	Registered Agentsignature require	ed when reinstating) DATE
Afte	FILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 r Payable to Florida Department	of State		9. Election Campaign Financing \$5.00 May 6e Trust Fund Contribution. Added to Fees
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-2IP	C HUMPHREY, JAMES I JR 7170 RIVERWOOD DR. COLUMBIA, MD 21046	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Additio
TITLE NAME STREET ADDRESS CITY-ST-2IP	DP THOLLANDER, ROBERT 7170 RIVERWOOD DR. COLUMBIA, MD 21046	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Additio
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST HOOPER, BETHANY H 7170 RIVERWOOD DR. COLUMBIA, MD 21046	□ Defete	TITLE NAME STREET ADDRESS CITY-ST-21P	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BARILA, TIMOTHY P 7170 RIVERWOOD DR. COLUMBIA, MD 21046	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Adoltic
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TRUE NAME STREET ADDRESS CRY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME -		□ Delete	TITLE NAME	☐ Change ☐ Additio
STREET ADDRESS CITY-ST-2IP			STREET ADDRESS CITY-ST-21P	
12. I hereby o	certify that the information supplied with	this filing does not qualify for	the exemption stated in Se	section 119.07(3)(i), Florida Statutes. I further certify that the information e same legal effect as if made under oath: that I am an officer or director 07, Florida Statutes; and that my name appears in Block 10 or Block 11 if

CONTRACTOR.