
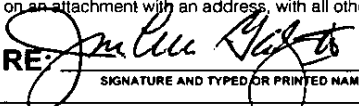


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2008 8:00 am
Secretary of State

03-03-2008 90205 003 ***150.00

DOCUMENT # F99000003462 1. Entity Name COCHRAN, STEPHENSON & DONKERVOT, INCORPORATED					
Principal Place of Business 323 WEST CAMDEN STREET, SUITE 700 WAREHOUSE AT CAMDEN YARDS BALTIMORE, MD 21201 US			Mailing Address 323 WEST CAMDEN STREET, SUITE 700 WAREHOUSE AT CAMDEN YARDS BALTIMORE, MD 21201 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 52-0886446	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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, 2008 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P DILLARD, DAVID A 2001 NORTH LAMAR STREET, SUITE 450 DALLAS, TX 75202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/V TIPTON, GLEN A 323 WEST CAMDEN STREET, SUITE 700 BALTIMORE, MD 21201 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/V SPIES, THOMAS P 323 WEST CAMDEN STREET, SUITE 700 BALTIMORE, MD 21201 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/V GALVEZ III, JOSE L 323 WEST CAMDEN STREET, SUITE 700 BALTIMORE, MD 21201 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/V WALKER, DUNCAN R 323 WEST CAMDEN STREET, SUITE 700 BALTIMORE, MD 21201 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/V NOJI, DAVID K 323 WEST CAMDEN STREET, SUITE 700 BALTIMORE, MD 21201 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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: 		Jose L. Galvez III		2/14/08	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

ATTACHMENT

40037224

Attachment

FLORIDA 2008 FOR-PROFIT CORPORATION ANNUAL REPORT
DOCUMENT #F99000003462
COCHRAN, STEPHENSON & DONKERVOT, INCORPORATED

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/V JOHN C. MORREL 323 WEST CAMDEN STREET, SUITE 700 BALTIMORE, MD 21201 <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/V NEAL I. KITT 323 WEST CAMDEN STREET, SUITE 700 BALTIMORE, MD 21201 <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/V DOUGLAS R. BISSELL 2001 NORTH LAMAR STREET, SUITE 450 DALLAS, TX 75202 <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CURTIS D. WILSON 323 WEST CAMDEN STREET, SUITE 700 BALTIMORE, MD 21201 <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BRUCE A. MANGER 323 WEST CAMDEN STREET, SUITE 700 BALTIMORE, MD 21201 <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/S JAMES H. DETERMAN, JR. 323 WEST CAMDEN STREET, SUITE 700 BALTIMORE, MD 21201 <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MARK A. DEBINSKI 323 WEST CAMDEN STREET, SUITE 700 BALTIMORE, MD 21201 <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JAMES F. ALBERT 323 WEST CAMDEN STREET, SUITE 700 BALTIMORE, MD 21201 <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JACOB T. PANIKAR 323 WEST CAMDEN STREET, SUITE 700 BALTIMORE, MD 21201 <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GREGORY L. DEHNE 1221 BRICKELL AVENUE, SUITE 1000 MIAMI, FL 33131 <input checked="" type="checkbox"/> Addition