FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Apr 25, 2001 8:00 am Secretary of State DOCUMENT # F99000004267 MORI SPC II, INC. 04-25-2001 90124 037 ***150.00 Principal Place of Business Mailing Address DEPT. 52,92413 DEPT. 52,924,13 10400 FERNWOOD ROAD 10400 FERNWOOD ROAD BETHESDA MD 20817 BETHESDA MD 20817 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 52-2186099 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 City 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. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registored Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Delete ☐ Change Addition TITLE TITLE Weisz, Stephen P NAME NAME 11016 OLD COACH ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP POTOMAC MD 20854 Addition ☐ Change TITLE ☐ Delete TITLE. PULSE, M. LESTER JR. NAME NAME STREET ADDRESS STREET ADDRESS 11202 FARMLAND DRIVE CITY-ST-ZIP CITY-ST-ZIP ROCKVILLE MD 20852 TITLE ☐ Delete TITLE Addition DOROTHY M. INGALLS MANN, W. DAVID NAME NAME STREET ADDRESS 10400 FERNWOOD ROAD STREET ADDRESS 2112 HUIDEKOPER PLACE, N.W. CITY-ST-ZIP CITY-ST-ZIP WASHINGTON DC 20007 BETHESDA, MD. 20817 TITLE ☐ Delete TITLE ☐ Change ☐ Addition BENZ, NANCY L NAME NAME STREET ADDRESS 9132 WILLOWGATE LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP POTOMAC MD 20854 TITLE AS ☐ Delete TITLE Addition NAME STANT, JEFF STREET ADDRESS STREET ADDRESS 717 N. OAKLAND STREET CITY-ST-ZIP **ARLINGTON VA 22203** CITY-ST-ZIP AS Addition TITLE ☐ Delete TITLE CAROLYN B. HANDLON 10400 FERNWOOD ROAD BETHESDA, MD. 20817 BRUFF, CAROL NAME STREET ADDRESS 13531 VANDALIA DRIVE STREET ADDRESS CITY-ST-ZIP **ROCKVILLE MD 20853** 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)(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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MANCY
SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NANCY L. BENZ

4/20/01

(301) 380-8742

Date

Daytime Phone #