## 2002 UNIFORM BUSINESS REPORT (UBR)

## FILED May 17, 2002 8:00 am § Secretary of State DOCUMENT # F99000004390 1. Entity Name 05-17-2002 90026 047 \*\*\*150 00 MID ATLANTIC INVESTOR SERVICES, INC. Principal Place of Business Mailing Address % FERRIS. BAKER WATTS, INC. 8403 COLESVILLE ROAD 1700 PENNSYLVANIA AVE., NW SUITE 700 SUITE 900 WASHINGTON DC 20006 SILVER SPRING MD 20910 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 52-1785835 Not Applicable Zip Country Zip 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 WELSCH, WILLIAM Street Address (P.O. Box Number is Not Acceptable) 59 CAMDEN COURT BAL HARBOUR FL 33154-1324 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: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Tax filing requirement and elects to do so. 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 (See criteria on back) Trust Fund Contribution. Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 **DCEO** TITLE **⊠** Delete TITLE Change Addition NAME FERRIS, GEORGE M JR Joe Martin NAME STREET ADDRESS 1700 PENNSYLVANIA AVE., NW 1700 PENNSYLVANIA AVE., NW STREET ADDRESS CITY-ST-7IP WASHINGTON DC 20006 CITY-ST-ZIP WASHINGTON DC 20006 ■ Delete TITLE Change Addition CRAIG HARTMAN DIETZ, ANDREW NAME 1700 PENNSYLVANIA AVE, NW STREET ADDRESS 1700 PENNSYLVANIA AVE, NW STREET ADDRESS CITY-ST-ZIP WASHINGTON DC 20006 CITY-ST-ZIP WASHINGTON DC 20006 TITLE PEV ☐ Delete TITLE ☐ Change ☐ Addition NAME URBAN, THEODORE W NAME STREET ADDRESS 1700 PENNSYLVANIA AVE., NW SUITE 700 STREET ADDRESS **WASHINGTON DC 20006** CITY-ST-ZIE CITY-ST-ZIP TITLE ■ Delete TITLE ☐ Change ☐ Addition NAME CLENDENIN, MARIA L NAME STREET ADDRESS 1700 PENNSYLVANIA AVE., NW SUITE 700 STREET ADDRESS CITY-ST-ZIP WASHINGTON DC 20006 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete

13. Thereby 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.

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change

Addition

CR2E034 (9/01)