

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000005076

FILED
Apr 26, 2011
Secretary of State

Entity Name: CAPREIT LOMA CORPORATION

Current Principal Place of Business:

11200 ROCKVILLE PIKE
SUITE 100
ROCKVILLE, MD 20852

New Principal Place of Business:

Current Mailing Address:

11200 ROCKVILLE PIKE
SUITE 100
ROCKVILLE, MD 20852

New Mailing Address:

FEI Number: 52-2194656

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: KADISH, RICHARD L
Address: 11200 ROCKVILLE PIKE, SUITE 100
City-St-Zip: ROCKVILLE, MD 20852

Title: CFO
Name: ESPOSITO, BRUCE A
Address: 11200 ROCKVILLE PIKE, SUITE 100
City-St-Zip: ROCKVILLE, MD 20852

Title: SVP
Name: GOLDSHINE, JEFFREY A
Address: 11200 ROCKVILLE PIKE, SUITE 100
City-St-Zip: ROCKVILLE, MD 20852

Title: SVP
Name: HEYMANN, ERNEST L
Address: 11200 ROCKVILLE PIKE, SUITE 100
City-St-Zip: ROCKVILLE, MD 20852

Title: VP
Name: GOODSSELL, EUGENE H
Address: 11200 ROCKVILLE PIKE, SUITE 100
City-St-Zip: ROCKVILLE, MD 20852

Title: VP
Name: COLLINS, TERENCE J
Address: 11200 ROCKVILLE PIKE, SUITE 100
City-St-Zip: ROCKVILLE, MD 20852

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: TERENCE J. COLLINS

VP

04/26/2011

Electronic Signature of Signing Officer or Director

Date