

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Sep 17, 1999 8:00 am
Secretary of State

09-17-1999 90007 025 ***550.00

DOCUMENT # M83879
1. Corporation Name
CHURCH STREET STATION, INC.



Principal Place of Business
129 W. CHURCH ST.
ORLANDO FL 32801

Mailing Address
250 W. PRATT ST.
23RD FLOOR
BALTIMORE MD 21201-2423
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/03/1988

4. FEI Number

52-1858030

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property. ☐ Yes ☒ No

2. Principal Place of Business
21 **111 Market Place**

2a. Mailing Address
26 **111 Market Place**

Suite, Apt. #, etc.
22 **Suite 200**

Suite, Apt. #, etc.
27 **Suite 200**

City & State
23 **Baltimore, Maryland**

City & State
28 **Baltimore, Maryland**

Zip
24 **21202**

Country
25 **USA**

Zip
29 **21202**

Country
30 **USA**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **DC** ☒ DELETE
NAME **AMBLER, BRUCE M.**
STREET ADDRESS **250 W. PRATT ST.**
CITY-ST-ZIP **BALTIMORE MD**

1.1 TITLE **DC** ☐ Change ☒ Addition
1.2 NAME **Edward A. Crooke**
1.3 STREET ADDRESS **39 W. Lexington St.**
1.4 CITY-ST-ZIP **Baltimore, MD 21201**

TITLE **D** ☒ DELETE
NAME **AUSLEY, PAUL C.**
STREET ADDRESS **129 W. CHURCH ST.**
CITY-ST-ZIP **ORLANDO FL**

2.1 TITLE **DP** ☐ Change ☒ Addition
2.2 NAME **Steven D. Kesler**
2.3 STREET ADDRESS **111 Market Place, Suite 500**
2.4 CITY-ST-ZIP **Baltimore, MD 21202**

TITLE **DS** ☐ DELETE
NAME **SKOWRONSKI, DAN R**
STREET ADDRESS **250 W. PRATT ST.**
CITY-ST-ZIP **BALTIMORE MD**

3.1 TITLE **S** ☒ Change ☐ Addition
3.2 NAME **Dan R. Skowronski**
3.3 STREET ADDRESS **111 Market Place, Suite 200**
3.4 CITY-ST-ZIP **Baltimore, MD 21202**

TITLE **DVC** ☒ DELETE
NAME **GRIFFIN, RANDALL M.**
STREET ADDRESS **250 W. PRATT ST.**
CITY-ST-ZIP **BALTIMORE MD**

4.1 TITLE **VT** ☐ Change ☒ Addition
4.2 NAME **Charles E. Garman, Jr.**
4.3 STREET ADDRESS **111 Market Place, Suite 200**
4.4 CITY-ST-ZIP **Baltimore, MD 21202**

TITLE **DPAS** ☒ DELETE
NAME **WINDHAM, ROBERT E.**
STREET ADDRESS **129 W. CHURCH ST.**
CITY-ST-ZIP **ORLANDO FL**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE **VT** ☒ DELETE
NAME **GILBERT, JOHN F.**
STREET ADDRESS **129 W. CHURCH STREET**
CITY-ST-ZIP **ORLANDO FL**

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **DAN R. SKOWRONSKI** 9/10/99 (410) 230-4681

0116003

CR2E034 (5/99)