

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 18, 2000 8:00 am
Secretary of State

04-18-2000 90265 018 ***150.00

DOCUMENT # P10329

1. Entity Name

MARRIOTT DISTRIBUTION SERVICES, INC.

Principal Place of Business

Mailing Address

10400 FERNWOOD RD
BETHESDA MD 20817
US

10400 FERNWOOD ROAD
DEPT 924.13
BETHESDA MD 20817-1109

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 52-1190602

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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.

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
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME ROBERT T PRAS
STREET ADDRESS 10400 FERNWOOD RD.
CITY-ST-ZIP BETHESDA MD 20817

TITLE VD ☐ Delete
NAME RYAN, JOSEPH
STREET ADDRESS 10400 FERNWOOD RD.
CITY-ST-ZIP BETHESDA MD

TITLE T ☒ Delete
NAME MURPHY, RAYMOND G
STREET ADDRESS 10400 FERNWOOD RD
CITY-ST-ZIP BETHESDA MD

TITLE S ☒ Delete
NAME MCGLOCKTON, JOAN RECTOR
STREET ADDRESS 10400 FERNWOOD RD.
CITY-ST-ZIP BETHESDA MD

TITLE AS ☐ Delete
NAME BENZ, NANCY L.
STREET ADDRESS 10400 FERNWOOD RD.
CITY-ST-ZIP BETHESDA MD

TITLE VD ☒ Delete
NAME STEIN, MICHAEL A.
STREET ADDRESS 10400 FERNWOOD ROAD
CITY-ST-ZIP BETHESDA MD

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☒ Change ☐ Addition
NAME CAROLYN B. HANDLON
STREET ADDRESS 10400 FERNWOOD ROAD
CITY-ST-ZIP BETHESDA, MD. 20817

TITLE S ☒ Change ☐ Addition
NAME WILLIM DAVID MANN
STREET ADDRESS 10400 FERNWOOD ROAD
CITY-ST-ZIP BETHESDA, MD. 20187

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☒ Change ☐ Addition
NAME M. LESTER PULSE JR.
STREET ADDRESS 10400 FERNWOOD ROAD
CITY-ST-ZIP BETHESDA, MD. 20817

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: *Nancy L. Benz*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NANCY L. BENZ

4/12/00

(301) 380-8742

Date

Daytime Phone #