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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P10868

1. Corporation Name

THE ORKAND CORPORATION

Principal Place of Business	Mailing Address
7799 Leesburg Pike Suiteb 700N Falls Church, VA 22043	7799 Leesburg Pike Suite 700N Falls Church, VA 22043

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business (21): Suite, Apt. # etc (22): City & State (23): Zip (24): Country (25)

2a. Mailing Address (26): Suite, Apt. #, etc. (27): City & State (28): Zip (29): Country (30)

3. Date Incorporated or Qualified: 07/23/1986

4. FEI Number: 52-0900334 ☐ 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 or has paid the current year Intangible Personal Property Tax due June 30 ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

The Prentice Hall Corporation System, Inc.
1201 Hays Street
Suite 105
Tallahassee, FL 32301

10. Name and Address of New Registered Agent

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 _____ (Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE PD Orkand, Donald s 7799 Leesburg Pike, STe 700N Falls Church, VA 22043	12 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	☐ Change ☒ Addition V Perry D. G. 7799 Leesburg Pike, Suite 700N Falls Church, VA
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE VCOD KYLE, THOMAS N 7799 LEESBURG PIKE, SUITE 700 N FALLS CHURCH VI	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition V Firth E. M. 7799 Leesburg Pike, Suite 700N Falls Church, VA
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE V CAIN, DAVID L 7799 LEESBURG PIKE, SUITE 700 N FALLS CHURCH VI	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE V COOK, THOMAS R 7799 LEESBURG PIKE, SUITE 700 N FALLS CHURCH VI	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 400002440174 -02/25/98--01017--012 ***158.75 PE 2.24

14. I hereby certify that the corporation named in this report is not an exempt organization as stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental requirement 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 added above.

SIGNATURE: Rony M. Cullen 2/17/98
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

CR2E034 (10/97)