


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 21, 2008 8:00 am**  
**Secretary of State**

04-21-2008 90090 015 \*\*\*150.00

<b>DOCUMENT # P11046</b>					
1. Entity Name <b>ESSEX HOUSE CONDOMINIUM CORPORATION</b>					
Principal Place of Business <b>10400 FERNWOOD RD BETHESDA, MD 20817 US</b>			Mailing Address <b>10400 FERNWOOD RD DEPT 924, 13 BETHESDA, MD 20817 US</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>52-0888837</b>	
Zip		Country		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>PRENTICE-HALL CORPORATION SYSTEM, INC.</b> <b>1201 HAYS STREET SUITE 105</b> <b>TALLAHASSEE, FL 32301</b>			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			<b>FL</b> 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SORENSON, ARNE M 10400 FERNWOOD RD. BETHESDA, MD 20817 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PULSE, LESTER M JR 10400 FERNWOOD RD. BETHESDA, MD 20817 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TURNER, TERRI L 10400 FERNWOOD RD. BETHESDA, MD 20817 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GORDON, BANCROFT S. 10400 FERNWOOD RD BETHESDA, MD 20817	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HANDLON, CAROLYN B 10400 FERNWOOD RD. BETHESDA, MD 20817 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BENZ, NANCY L. 10400 FERNWOOD RD. BETHESDA, MD <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS STANT, JEFF B 10400 FERNWOOD ROAD BETHESDA, MD 20817 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <b>NANCY L. BENZ</b>		<i>Nancy L. Benz</i>		Date: <b>4/11/08</b> 301-380-3000	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

2/19/2008

**ATTACHMENT**

Page Number: 1

20. Tax - Annual Report 40075412  
C2500 - Essex House Condominium Corporation AP 11046

Business Address: 10400 Fernwood Road  
Bethesda MD 20817

Federal ID: 52-0888837  
State of Incorporation: Delaware - 1/16/1969

**Officers**

President	Sorenson, Arne Morris
Vice President	Pulse, M. Lester, Jr.
Treasurer	Handlon, Carolyn Burris
Director	Ryan, Edward A.
Director	Sorenson, Arne Morris
Secretary	Gordon, Bancroft S.
Assistant Secretary	Benz, Nancy L.
Assistant Secretary	Stant, Jeff B.