

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 11, 2001 8:00 am  
Secretary of State

05-11-2001 90101 006 \*\*\*150.00

DOCUMENT # P12507

1. Entity Name

CTF ORLANDO CORPORATION

Principal Place of Business

1615 N STREET NW  
STE 700  
WASHINGTON DC 20036  
US

Mailing Address

255 ALHAMBRA CIRCLE  
STE 600  
CORAL GABLES FL 33134  
US

2. Principal Place of Business

1615 M Street NW

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 34-1533901

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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET  
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, 2001 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 DVPT ☐ Delete  
NAME GAFFNEY, PATRICK M.  
STREET ADDRESS 10400 FERNWOOD RD  
CITY-ST-ZIP BETHESDA MD 20817

TITLE DVPT ☒ Change ☐ Addition  
NAME Patrick M. Gaffney  
STREET ADDRESS 1615 M Street NW, # 700  
CITY-ST-ZIP Washington, DC 20036

TITLE VP ☒ Delete  
NAME KIMBALL, KEVIN M.  
STREET ADDRESS 10400 FERNWOOD RD  
CITY-ST-ZIP BETHESDA MD 20817

TITLE VP/IS ☐ Change ☒ Addition  
NAME Bradley D. Hornbacher  
STREET ADDRESS 255 Alhambra Circle, # 600  
CITY-ST-ZIP Coral Gables, FL 33134

TITLE DPS ☐ Delete  
NAME HEININGER, KARL DANIEL  
STREET ADDRESS 10400 FERNWOOD RD  
CITY-ST-ZIP BETHESDA MD 20817

TITLE Director/President ☒ Change ☐ Addition  
NAME K. Daniel Heininger  
STREET ADDRESS 1615 M Street NW, # 700  
CITY-ST-ZIP Wash., DC 20036

TITLE VP ☒ Delete  
NAME WALKER, MYRON D.  
STREET ADDRESS 10400 FERNWOOD RD  
CITY-ST-ZIP BETHESDA MD 20817

TITLE VP/AS ☐ Change ☒ Addition  
NAME Heidi Fuerst  
STREET ADDRESS 1615 M Street NW, # 700  
CITY-ST-ZIP Wash., DC 20036

TITLE VP ☒ Delete  
NAME CLIST, TODD  
STREET ADDRESS 10400 FERNWOOD RD.  
CITY-ST-ZIP BETHESDA MD 20817

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

TITLE AS ☒ Delete  
NAME BENZ, NANCY L.  
STREET ADDRESS 10400 FERNWOOD RD  
CITY-ST-ZIP BETHESDA MD 20817

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Bradley D. Hornbacher, AS SECRETARY

Date

Daytime Phone #

4-30-01 305-442-1862

CR2E034 (10/00)