

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P16169 (5)

1. Corporation Name

PREMISES PROVIDERS, INC.



Principal Place of Business

3000 K ST. NW - STE 400
SUITE 200
WASHINGTON DC 20007
US

Mailing Address

3000 K ST. NW - STE 400
SUITE 200
WASHINGTON DC 20007
US

3. Date Incorporated or Qualified

09/29/1987

3a. Date of Last Report

08/14/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

52-1522062

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 has liability for intangible tax under s. 199.032.
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

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

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 607.1505, 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, if different from above

Signature typed or printed name of registered agent, if different from above

DATE

12. OFFICERS AND DIRECTORS

TITLE	PTD	☒ DELETE
NAME	MILLER, HERBERT S.	
STREET ADDRESS	3000 K STREET, NW., S-200	
CITY - ST - ZIP	WASHINGTON DC	
TITLE	TD	☐ DELETE
NAME	NICK, HARRY H	
STREET ADDRESS	3000 K ST NW STE 400	
CITY - ST - ZIP	WASHINGTON DC	
TITLE	S	☐ DELETE
NAME	SALERNO, RONALD P	
STREET ADDRESS	3000 K STR NW STE 400	
CITY - ST - ZIP	WASHINGTON DC	
TITLE	D	☐ DELETE
NAME	SIEGAL, LAURENCE C	
STREET ADDRESS	3000 K STR, NW STE 400	
CITY - ST - ZIP	WASHINGTON DC	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	☒ Change ☐ Addition
1.2 NAME	Peter B. McMillan	
1.3 STREET ADDRESS	3000 K Street, NW Ste 400	
1.4 CITY - ST - ZIP	Washington, DC 20007	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE	Secretary	☒ Change ☐ Addition
3.2 NAME	Thomas E Frost	
3.3 STREET ADDRESS	3000 K Street, NW Ste 400	
3.4 CITY - ST - ZIP	Washington, DC 20007	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Thomas E Frost

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/13/96

202/965-3600

CR2E034 (12/95)