

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**  
**Feb 12 1998 8:00am**  
**Secretary of State**

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1998**



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

**DOCUMENT # P17067**

**(0)**

1. Corporation Name

**CPI CHURCH STREET, INC.**

Principal Place of Business

**250 W. PRATT ST. 23RD. FL.  
BALTIMORE MD 21201-2423**

Mailing Address

**250 W. PRATT ST. 23RD. FL.  
BALTIMORE MD 21201-2423**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**12/07/1987**

4. FEI Number

**52-1502168**

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

30

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 607.1508, 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE  
NAME **PDAS**  
STREET ADDRESS **WINDHAM, ROBERT E.**  
CITY-ST-ZIP **129 W. CHURCH ST.  
ORLANDO FL**

TITLE ☐ DELETE  
NAME **CD**  
STREET ADDRESS **AMBLER, BRUCE**  
CITY-ST-ZIP **250 WEST PRATT STREET  
BALTIMORE MD 23**

TITLE ☐ DELETE  
NAME **D**  
STREET ADDRESS **AUSLEY, PAUL C.**  
CITY-ST-ZIP **129 W. CHURCH ST.  
ORLANDO FL**

TITLE ☐ DELETE  
NAME **OVC**  
STREET ADDRESS **GRIFFIN, RANDALL M**  
CITY-ST-ZIP **250 WEST PRATT STREET  
BALTIMORE MD**

TITLE ☐ DELETE  
NAME **SD**  
STREET ADDRESS **SKOWRONSKI, DAN R**  
CITY-ST-ZIP **250 WEST PRATT STREET  
BALTIMORE MD**

TITLE ☐ DELETE  
NAME **VT**  
STREET ADDRESS **GILBERT, JOHN F**  
CITY-ST-ZIP **129 W CHURCH STREET  
ORLANDO FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. 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 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:

**Dan R. Skowronski, Secretary 01/07/98 (410) 783-2814**

CR2E034 (10/97)

**CPI CHURCH STREET, INC.**

**12. Officers and Directors continued**

**V**

**Ralph R. Rodriguez  
129 W. Church Street  
Orlando, FL**