

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P20562

1. Entity Name

COM/NAV REALTY CORP.

**FILED**  
**Apr 28, 2000 8:00 am**  
**Secretary of State**

04-28-2000 90064 008 \*\*\*150.00

Principal Place of Business

Mailing Address

200 S LAMAR ST  
JACKSON MS 39225  
US

~~200 S LAMAR ST~~  
~~JACKSON MS 39201-4012~~  
~~US~~

2. Principal Place of Business

3. Mailing Address

1133 19th ST NW

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DEPT 8408

City & State

City & State

WASHINGTON DC

Zip

Country

Zip

Country

20036

US

4. FEI Number

64-0762666

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

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

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, 2000 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 V ☒ Delete  
NAME HUDSON, TERRI  
STREET ADDRESS 200 S LAMAR ST  
CITY-ST-ZIP JACKSON MS 39201

TITLE VP GEN TAX COUNSEL ☐ Change ☒ Addition  
NAME WALTER NAGEL  
STREET ADDRESS 1133 19th ST NW  
CITY-ST-ZIP WASHINGTON DC 20036

TITLE S ☒ Delete  
NAME KRISS, LEONARD G.  
STREET ADDRESS 200 S. LAMAR ST #900  
CITY-ST-ZIP JACKSON MS

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

TITLE D ☒ Delete  
NAME BHAGAT, JAI P.  
STREET ADDRESS 200 S. LAMAR ST. STE 900  
CITY-ST-ZIP JACKSON MS

TITLE PRES/DIR/CEO ☐ Change ☒ Addition  
NAME BERNARD EGBERS  
STREET ADDRESS 500 Clinton Center Dr.  
CITY-ST-ZIP Clinton, MS 39056

TITLE T ☒ Delete  
NAME FERGUSON, THOMAS R.  
STREET ADDRESS 200 S. LAMER ST. STE 500  
CITY-ST-ZIP JACKSON MS

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ST CFO ☐ Change ☒ Addition  
NAME SCOTT SULLIVAN  
STREET ADDRESS 500 Clinton Center Dr.  
CITY-ST-ZIP Clinton, MS 39056

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

Walter Nagel 4/24/00

Date

202-736-6000

Daytime Phone #

V.P. & Gen. Tax Counsel

CR2E034 (9/99)