

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

FILED
Mar 31 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P25296 (5)

1. Corporation Name
MARRIOTT FIBM ONE CORPORATION



DO NOT WRITE IN THIS SPACE

Principal Place of Business DEPT. 862 10400 FERNWOOD ROAD BETHESDA MD 20817-1109 US	Mailing Address 10400 FERNWOOD ROAD DEPT 72862 BETHESDA MD 20817 US
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3. Date Incorporated or Qualified 07/25/1989	
4. FEI Number 52-1637152	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE VD	NAME PARSONS, ROBERT JR.	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 10400 FERNWOOD RD.	CITY-ST-ZIP BETHESDA MD	1.2 NAME	
	<input type="checkbox"/> DELETE	1.3 STREET ADDRESS	
TITLE VASD	NAME TOWNSEND, CHRISTOPHER G.	1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 10400 FERNWOOD RD.	CITY-ST-ZIP BETHESDA MD	2.1 TITLE	
	<input type="checkbox"/> DELETE	2.2 NAME	
TITLE V	NAME TERRENCE C. GOLDEN	2.3 STREET ADDRESS	
STREET ADDRESS 10400 FERNWOOD ROAD	CITY-ST-ZIP BETHESDA MD	2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> DELETE	3.1 TITLE	
TITLE T	NAME WARDINSKI, BRUCE D	3.2 NAME	
STREET ADDRESS 10400 FERNWOOD RD.	CITY-ST-ZIP BETHESDA MD	3.3 STREET ADDRESS	
	<input type="checkbox"/> DELETE	3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE AS	NAME WALLACE, SUSAN E.	4.1 TITLE	
STREET ADDRESS 10400 FERNWOOD RD.	CITY-ST-ZIP BETHESDA MD	4.2 NAME	
	<input type="checkbox"/> DELETE	4.3 STREET ADDRESS	
TITLE VP	NAME STEMERMAN, BRUCE F.	4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 10400 FERNWOOD RD.	CITY-ST-ZIP BETHESDA MD	5.1 TITLE	
	<input type="checkbox"/> DELETE	5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
		6.1 TITLE	PRESIDENT/DIRECTOR
		6.2 NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	

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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.

CR2E034 (10/97)