

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 18, 2005 08:00 AM
Secretary of State

DOCUMENT # P27006

1. Entity Name
MTM BUILDER/DEVELOPER, INC.



Principal Place of Business
8800 PENNSLVIA AVENUE
UPPER MARLBORO, MD 20772 US

Mailing Address
8800 PENNSLVIA AVENUE
UPPER MARLBORO, MD 20772 US

DO NOT WRITE IN THIS SPACE



01122005 No Chg-P CR2E034 (10/03)

4. FEI Number
54-1270371

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MOREHOUSE, DEAN F.
14290 CYPRESS ISLAND CIRCLE
PALM BEACH GARDENS, FL 33410

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MOREHOUSE, DEAN F
STREET ADDRESS	8800 PENNSLVIA AVENUE
CITY-ST-ZIP	UPPER MARLBORO, MD 20772
TITLE	V
NAME	CUTLER, MIRIAM J.
STREET ADDRESS	2301 GALLOWS RD #230
CITY-ST-ZIP	DUNN LORING, VA 22027
TITLE	V
NAME	EISENLOHR, JAMES B.
STREET ADDRESS	8800 PENNSLVIA AVENUE
CITY-ST-ZIP	UPPER MARLBORO, MD 20772
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

100000183478
01/19/05-80069-019 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Dean F. Morehouse
Dean F. Morehouse, President 1/17/2005 (301) 420-8880

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #