


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 07, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P29450**  
 1. Entity Name  
**MONUMENTAL INVESTMENT CORPORATION**



Principal Place of Business: **4530 HOLLINS FERRY RD. BALTIMORE, MD 21227 US**  
 Mailing Address: **301 MERRITT SOUTH 6TH FLOOR NORWALK, CT 06851 US**

**DO NOT WRITE IN THIS SPACE**



01202004 No Chg-P CR2E034 (10/03)

4. FEI Number: **52-1222529**  
 Applied For:  Not Applicable

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

6. Name and Address of Current Registered Agent  
**CORPORATION SERVICE COMPANY**  
**1201 HAYS STREET**  
**TALLAHASSEE, FL 32301**

**DO NOT WRITE 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: \_\_\_\_\_ DATE: \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

U00000040673  
 02/09/04-80058-002 150.00

10. OFFICERS AND DIRECTORS

TITLE	PT
NAME	RITCHIE, M. DELMAR, JR.
STREET ADDRESS	4530 HOLLINS FERRY RD.
CITY-ST-ZIP	BALTIMORE, MD 21227
TITLE	VP
NAME	PEREZ, ADALBERTO A.
STREET ADDRESS	4530 HOLLINS FERRY RD.
CITY-ST-ZIP	BALTIMORE, MD 21227
TITLE	EVPS
NAME	LEVY, JEFFREY M
STREET ADDRESS	301 MERRITT SEVEN
CITY-ST-ZIP	NORWALK, CT 06851
TITLE	VP
NAME	SCHORR, DAVID A
STREET ADDRESS	10 WYNDCREST AVE
CITY-ST-ZIP	BALTIMORE, MD 21228
TITLE	S
NAME	DONELAN, FRANK
STREET ADDRESS	301 MERRITT SEVEN
CITY-ST-ZIP	NORWALK, CT 06851
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE 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)(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 10 or Block 11 if changed, or on an attachment with an address, with all other filers empowered.

SIGNATURE: *Frank Donelan* **01/22/04** **203-849-7800**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #