

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

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PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P33272 (6)**  
1. Corporation Name  
**REALTY INVESTMENT COMPANY, INC. OF MARYLAND**



Principal Place of Business <b>8737 COLESVILLE RD. STE. #800 SILVER SPRING MD 20910</b>		Mailing Address <b>8737 COLESVILLE RD. STE. #800 SILVER SPRING MD 20910</b>		3. Date Incorporated or Qualified <b>03/22/1991</b>	3a. Date of Last Report <b>05/01/1995</b>
21. Principal Place of Business	22. Suite, Apt. #, etc.	23. City & State	24. Zip	25. Country	26. Mailing Address
27. Suite, Apt. #, etc.	28. City & State	29. Zip	30. Country	4. FEI Number <b>53-0197749</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No		10. Name and Address of New Registered Agent		
9. Name and Address of Current Registered Agent		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.			

**MATHEW LUNDSTROM  
C/O REALTY INVESTMENT CO., INC.  
2447 N. WICKHAM RD., #118  
MELBOURNE FL 32935**

81. Name	82. Street Address (P.O. Box Number is Not Acceptable)	83.	84. City	85. Zip Code
			<b>FL</b>	

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CP	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BAINUM, STEWART</b>	1.2 NAME	<b>C/P/D BAINUM, STEWART</b>
STREET ADDRESS	<b>8737 COLESVILLE ROAD, SUITE 800</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>SILVER SPRING MD 20910</b>	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>EVERNGAM, WILLIAM H.</b>	2.2 NAME	<b>BAUGHER, ROBERT L.</b>
STREET ADDRESS	<b>8737 COLESVILLE ROAD, SUITE 800</b>	2.3 STREET ADDRESS	<b>8737 COLESVILLE ROAD, SUITE 800</b>
CITY-ST-ZIP	<b>SILVER SPRING MD 20910</b>	2.4 CITY-ST-ZIP	<b>SILVER SPRING, MD 20910</b>
TITLE	SD	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>BAINUM, BARBARA</b>	3.2 NAME	<b>DONNELLY, RUTH</b>
STREET ADDRESS	<b>8737 COLESVILLE ROAD, SUITE 800</b>	3.3 STREET ADDRESS	<b>8737 COLESVILLE ROAD, SUITE 800</b>
CITY-ST-ZIP	<b>SILVER SPRING MD 20910</b>	3.4 CITY-ST-ZIP	<b>SILVER SPRING, MD 20910</b>
TITLE	V	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BOWDITCH, PATRICIA L.</b>	4.2 NAME	<b>V/T BOWDITCH, PATRICIA L.</b>
STREET ADDRESS	<b>8737 COLESVILLE ROAD, SUITE 800</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>SILVER SPRING MD 20910</b>	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>BAINUM, BRUCE</b>	5.2 NAME	<b>D FROOM, ROBERTA</b>
STREET ADDRESS	<b>8737 COLESVILLE ROAD, SUITE 800</b>	5.3 STREET ADDRESS	<b>8737 COLESVILLE ROAD, SUITE 800</b>
CITY-ST-ZIP	<b>SILVER SPRING MD 20910</b>	5.4 CITY-ST-ZIP	<b>SILVER SPRING, MD 20910</b>
TITLE	D	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>PENSCHLER, SCOTT</b>	6.2 NAME	<b>D RENSCHLER, SCOTT</b>
STREET ADDRESS	<b>8737 COLESVILLE ROAD, SUITE 800</b>	6.3 STREET ADDRESS	
CITY-ST-ZIP	<b>SILVER SPRING MD 20910</b>	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Patricia L. Bowditch* PATRICIA L. BOWDITCH Date: **4/25/96** Daytime Phone #: **301-495-4400**

CR2E034 (12/95)

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SEE

ADDITIONAL DIRECTORS FOR REALTY INVESTMENT COMPANY, INC. OF MARYLAND  
(RE: DOCUMENT # P33272)

TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	MOORE, GARLAND P.	
STREET ADDRESS		5.3 STREET ADDRESS	8737 COLESVILLE ROAD, SUITE 800	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	SILVER SPRING, MD 20910	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	SHREVE, CHRISTINE A.	
STREET ADDRESS		6.3 STREET ADDRESS	8737 COLESVILLE ROAD, SUITE 800	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	SILVER SPRING, MD 20910	

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:** \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #