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CORPORATION ANNUAL REPORT
1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN -2 AM 8:12

DOCUMENT # **P38736** **(5)**

1. Corporation Name
RPFL, INC.

Principal Place of Business	Mailing Address
% HARYLEY D. COOK 11 CANAL CENTER PLAZA STE. #200 ALEXANDRIA VA 22314	% HARYLEY D. COOK 11 CANAL CENTER PLAZA STE. #200 ALEXANDRIA VA 22314

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
05/11/1992	04/14/1994

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	
21	26	54-1654143	☐ Applied For ☐ Not Applicable
22 Suite, Apt #, etc	27 Suite, Apt #, etc	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
23 City & State	28 City & State	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
24 Zip / 25 Country	29 Zip / 30 Country	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYES ST. STE. #105 TALLAHASSEE FL 32301	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

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 _____ DATE _____
Signature, typed or printed name of Registered Agent and Title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY ST ZIP	PTS ROBERT, JOSEPH E JR 11 CANAL CENTER PLAZA ALEXANDRIA VA 22314	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	VS COOK, HARLEY D. 11 CANAL CENTER PLAZA ALEXANDRIA VA 22314	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY ST ZIP	☒ Change ☐ Addition VS Cox, Stephen E. 11 Canal Center Plaza Alexandria, Va 22314
TITLE NAME STREET ADDRESS CITY ST ZIP	AT HOZIK, RICHARD 11 CANAL CENTER PLAZA ALEXANDRIA VA 22314	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	AS CUNNINGHAM, BRUCE T 11 CANAL CENTER PLAZA ALEXANDRIA VA 22314	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY ST ZIP	☐ Change ☐ Addition

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)(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 with an address, with the exception of an attachment with an address.

703-239-4444

SIGNATURE: Stephen E. Cox Vice President 5/23/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000004 CP