FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 AM 4:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P39051** **(8)**

1. Corporation Name
WALKER & DUNLOP MULTIFAMILY, INC.

Principal Place of Business
7500 OLD GEORGETOWN ROAD, SUITE 800
BETHESDA MD 20814

Mailing Address
7500 OLD GEORGETOWN ROAD
800
BETHESDA MD 20814
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	05/29/1992
3a. Date of Last Report	04/08/1994
4. FEI Number	52-1572893 ( ) Applied For ( ) Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes	☐ Yes ☒ No

2. Principal Place of Business — 21 — Suite, Apt. # etc. 22 — City & State 23 — Zip 24 — Country 25

2a. Mailing Address — 26 — Suite, Apt. # etc. 27 — City & State 28 — Zip 29 — Country 30

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
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 FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0505 and 617.1508, 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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	TITLE	V ☐ Change ☒ Addition
NAME	WALKER, MALLORY	NAME	W.W. Smyth
STREET ADDRESS	3414 LOWELL STREET NW	STREET ADDRESS	11290 South Glen Road
CITY-ST-ZIP	WASHINGTON DC	CITY-ST-ZIP	Rockville, MD 20854
TITLE	VTD	TITLE	V/S ☐ Change ☒ Addition
NAME	YAVINSKY, MERRILL A.	NAME	Gwendolyn A. Weaver
STREET ADDRESS	11705 BEEKMAN PLACE	STREET ADDRESS	6520 Commonwealth Court
CITY-ST-ZIP	POTOMAC MD	CITY-ST-ZIP	Manassas, Virginia 22111
TITLE	VS	TITLE	V ☐ Change ☒ Addition
NAME	SLAVINSKAS, MARY ELLEN	NAME	Colleen D. Andrews
STREET ADDRESS	101 N. MANCHESTER STREET	STREET ADDRESS	9411 Woodland Drive
CITY-ST-ZIP	ARLINGTON VA	CITY-ST-ZIP	Silver Spring, MD 20910
TITLE	V	TITLE	S ☐ Change ☒ Addition
NAME	MILLER, FRED L	NAME	Anne M. Barefoot
STREET ADDRESS	30234 MINE RUN RD	STREET ADDRESS	6701 Alexis Drive
CITY-ST-ZIP	MINE RUN VA	CITY-ST-ZIP	Bowie, MD 20720
TITLE	V	TITLE	V ☐ Change ☒ Addition
NAME	SMITH, HOWARD W., III	NAME	Donna Mighty
STREET ADDRESS	2809 - 31ST STREET NW	STREET ADDRESS	1835 Underwood Road
CITY-ST-ZIP	WASHINGTON DC	CITY-ST-ZIP	Gambrills, MD 21054
TITLE	V	TITLE	S ☐ Change ☒ Addition
NAME	GAYNOR, MITCHELL M.	NAME	M. Carol Hamer
STREET ADDRESS	14002 NORTH COMMONS WAY	STREET ADDRESS	214 Midpines Court #3C
CITY-ST-ZIP	POTOMAC MD	CITY-ST-ZIP	Owings Mills, MD 21117

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(1)(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.

SIGNATURE: [signature] 4/21/95 (301) 215-5514

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Mitchell M. Gaynor, Senior Vice President & CFO

Date — Daytime Phone #

0474703 FP