FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P39051

(8)

WALKER & DUNLOP MULTIFAMILY, INC.

FILED May 13 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address			i registet ind trife terre deine greet tidt atbit eren stütt etekt alem eren ten.					
7500 OLD GEORGETOWN ROAD. SUITE 800 BETHESDA MD 20814		7500 OLD GEORGETOWN ROAD						
		800 Bethesda MD 20814			DO NOT WRITE IN THIS SPACE			
		US			3. Date Incorporated or Qualified			
		••			05/29/1992		l	
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	T	Applied For	
21		26			52-1572893		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional			
22		27			G. Commond of States Scotted	Fee	Required	
City & State	•	City & State			6. Election Campaign Financing	\$5.00 May Be		
23		28	1 .		Trust Fund Contribution		led to Fees	
Zip	Country	Zφ	Count	ry	8. This corporation owes or has paid the o	current year	r Intangible	
24	9. Name and Address of Curren	1 Registered Agent	30		Personal Property Tax due June 30. 10. Name and Address of New Registers			
			В	1 Name	19. Hame and Addition of their institution			
	RPORATION SERVICE COMPAN	Y	8					
	1201 HAYS STREET				dress (P.O. Box Number is Not Acceptable)			
IAL	LAHASSEE FL 32301		8	3				
			Ľ	1				
			8	4 City	F	85 Z	Zip Code	
44 0	the previous of Continue CO7 050	2 and 607 1609 Florida Statu	der the ebo	ve-pamed cor			na its registered	
office or re	egistered agent, or both, in the State	of Florida. Such change was	authorized	by the corpora	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	ppointment	as registered	
agent. I ar	m familiar with, and accept the obliga	ations of, Section 607.0505, P	lorida Statut	es.				
SIGNATURE	Signature typed or printed name of registered age	(NO	1F Boolelared A	nen) signalure regi	ulred when reinstating) DATE			
12.	OFFICERS AN		13.	gon o graduate requ	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	TORS IN 12	
TITLE	PD	DELETE	1.1 DILE			Chan		
NAME	WALKER, MALLORY		1.2 NAM	E				
STREET ADDRESS	3414 LOWELL STREET NW			ET ADDRESS				
CITY-ST-ZIP	WASHINGTON DC		1.4 CITY	- ST-ZIP				
TITLE	VTD	DELETE	21 TITLE			Chan	nge Addition	
NAME	YAVINSKY, MERRILL A.		22 NAM	E				
STREET ADDRESS	11705 BEEKMAN PLACE		2.3 STRE	ET ADDRESS				
CITY-ST-ZIP	POTOMAC MD		2 4 CITY	'-S1-ZIP				
TITLE	VS	DELETE	3.1 TITLE			☐ Chan	nge Addition	
NAME	SLAVINSKAS, MARY ELLEN		3 2 NAM	E				
STREET ADDRESS	101 N. MANCHESTER STREE	:T	3.3 STRE	ET ADDRESS				
CITY-ST-ZIP	ARLINGTON VA		3.4 CITY	r-ST-ZIP				
TITLE	V	DELETE	4.1 TITLI			Chan	nge Addition	
NAME	MILLER, FRED L		4. 2 NAN	AE				
STREET ADDRESS	30234 MINE RUN RD		4.3 STR	ET ADDRESS				
CITY-ST-ZIP	MINE RUN VA		4.4 City	-ST-ZIP				
TITLE	V	DELETE	5.1 TITLE			Chan	nge Addition	
NAME	SMITH, HOWARD W., III		5.2 NAM	E	•			
STREET ADDRESS	2809 - 31ST STREET NW		5.3 STRE	ET ADDRESS				
CITY-ST-ZIP	WASHINGTON DC		5.4 CITY	-ST-ZIP				
TITLE	٧	DELETE	6.1 TITE			☐ Chan	nge 🔲 Addition	
NAME	GAYNOR, MITCHELL M.		6.2 NAM	E				
STREET ADDRESS	14002 NORTH COMMONS W	/AY	6.3 STR	ET ADDRESS				
CITY ST. 7IP	POTOMAC MD		64 CITY	-S1-ZIP	•			
14, I hereby	certify that the information supplied w	ith this filing does not qualify	for the exen	nption stated i	in Section 119.07(3)(i), Florida Statutes. I further	certify that	the information	

6. I hereby certify that the information supplied with this tiling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes 1 further certify that the information indicated on this annual report or suppliencental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 it changed, or on an attachment with an address.

SIGNATURE:

W

Mesam

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