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May 13, 1999 8:00 am
Secretary of State
05-13-1999 90042 032 ***150.00

PROFIT CORPORATION ANNUAL REPORT
~~1998~~ 1999

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

DOCUMENT # **P41033** (2) ✓

1. Corporation Name
JER PEOPLES SOUTHWEST SERVICES, INC.

Principal Place of Business	Mailing Address
1650 TYSONS BLVD SUITE 1600 MCLEAN VA 22102	1650 TYSONS BLVD SUITE 1600 MCLEAN VA 22102

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/20/1992

2. Principal Place of Business (21) | 2a. Mailing Address (26)

Suite, Apt. #, etc (22) | Suite, Apt. #, etc (27)

City & State (23) | City & State (28)

Zip (24) | Country (25) | Zip (29) | Country (30)

4. FEI Number: 54-1635292 ☐ 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 owes or has paid the current year Intangible *Personal Property Tax due June 30* ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 607.0502 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 _____ (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	~~PCD~~	☐ DELETE	11 TITLE	CEO/DIR/Chairman	☒ Change ☐ Addition
NAME	ROBERT, JOSEPH E., JR.		12 NAME		
STREET ADDRESS	1650 TYSONS BLVD., SUITE 1600	→	13 STREET ADDRESS		
CITY-ST-ZIP	MCLEAN VA 22102		14 CITY-ST-ZIP		
TITLE	~~VAS~~	☐ DELETE	21 TITLE	V/AS/Mng.Dir.	☒ Change ☐ Addition
NAME	WARD, DANIEL T.		22 NAME		
STREET ADDRESS	1650 TYSONS BLVD. SUITE 1600	→	23 STREET ADDRESS		
CITY-ST-ZIP	MCLEAN VA 22102		24 CITY-ST-ZIP		
TITLE	TVAS	☐ DELETE	31 TITLE		☐ Change ☐ Addition
NAME	CUNNINGHAM, BRUCE T JR		32 NAME		
STREET ADDRESS	1650 TYSONS BLVD		33 STREET ADDRESS		
CITY-ST-ZIP	MCLEAN VA 22102		34 CITY-ST-ZIP		
TITLE	~~VAS~~	☐ DELETE	41 TITLE	Pres/AS	☒ Change ☐ Addition
NAME	HARMON, DEBORAH L		42 NAME		
STREET ADDRESS	1650 TYSONS BLVD.	→	43 STREET ADDRESS		
CITY-ST-ZIP	MCLEAN VA 22102		44 CITY-ST-ZIP		
TITLE	SV	☐ DELETE	51 TITLE	Pres/AS	☐ Change ☒ Addition
NAME	HARKINS, RICHARD A		52 NAME	Jonathan S. Kern	
STREET ADDRESS	1650 TYSONS BLVD.		53 STREET ADDRESS	1650 Tysons Blvd., Suite 1600	
CITY-ST-ZIP	MCLEAN VA 22102		54 CITY-ST-ZIP	McLean, VA 22102	
TITLE		☐ DELETE	61 TITLE	Sen.VP/AS	☐ Change ☒ Addition
NAME			62 NAME	Connie S. Parker	
STREET ADDRESS			63 STREET ADDRESS	1650 Tysons Blvd., Suite 1600	
CITY-ST-ZIP			64 CITY-ST-ZIP		

CR2E034 (10/97)

14. 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 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, added or deleted.

SIGNATURE: Richard A. Harkins Richard A. Harkins, VP 703/714-8000