

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

FILED
Apr 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000057939 (8)**

1. Corporation Name
MCHD CYPRESS CREEK CORP.



Principal Place of Business 10750 COLUMBIA PIKE SILVER SPRING MD 20901	Mailing Address 10750 COLUMBIA PIKE SILVER SPRING MD 20901
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/05/1994	Applied For <input type="checkbox"/> Not Applicable
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2. Principal Place of Business 21 10770 Columbia Pike Suite, Apt. #, etc.	2a. Mailing Address 26 10770 Columbia Pike Suite, Apt. #, etc.	4. FEI Number 52-1889092
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22 Silver Spring, MD City & State	27 Silver Spring, MD City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
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23 20901 Zip	25 US Country	28 20901 Zip	30 US Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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8. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
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THE PRENTICE HALL CORPORATION SYSTEM, INC. 1201 HAYS ST. SUITE 105 TALLAHASSEE FL 32301	81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code
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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 signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD LANDRY, DONALD J 10750 COLUMBIA PIKE SILVER SPRING MD <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	President & Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Same 10770 Columbia Pike Silver Spring, MD 20901
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST HUMPHRIES, WELDON 10750 COLUMBIA PIKE SILVER SPRING MD <input checked="" type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Kevin P. Hanley 10770 Columbia Pike Silver Spring, MD 20901
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Pamela M. Williams 10770 Columbia Pike Silver Spring, MD 20901
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 change, or on an attachment with an address.

SIGNATURE _____ **301-979-7001**

CR2E034 (10/97)