CULUMENT #       P950000111071 (4)         NET-TEL CORPORATION       Intermediate intermedinte intermediate intermedinte intermediate inte	PROFIT CORPORATION ANNUAL REPORT <b>1997</b>	Sendra B Secretar	TMENT OF STATE • Mortham y of State ©RPORATIONS	Feb 25 1 Secreta		8:(	
Cipel Hack of Inscribes         Multing Address           If REECON IRVE RESON YA X200         If REECON IRVE SUITE 50 RESTOR YA X2000         If		5000011071 (4)					
Principie Priorie of Number         Applied Form           State, Apit A, etc.         28           State, Apit A, etc.         27           City A State         21           City A State         23           Country         23           City A State         23           City A State         23           City A State         23           City A State         24           City A State         24           City A State         10           Rest meand Address of Current Registered Agent         10           Ito State Address (P.O. Box Number is Not Acceptable)         41           PLANTATION FL 33324         41           PLANTATION FL 33324         41           PARTICLE Address (P.O. Box Number is Not Acceptable)         42           PLANTATION FL 33324         15           PLANTATION FL 33324         15           PLANTATION FL 33324         16           PLANTATION FL 33324         16           PLANTATION FL 33324         1	121 FREEDOM DRIVE	11921 FREEDOM DRIVE SUITE 550		3. Date Incorporated or Qualified	3a. Date o	of Last Re	
Suite, April #, etc.  City & State  City & Sta	Principal Place of Business	2a. Mailing Address			06/11		blied For
27     Country     6. Contribute of Statute Defined     X     Free Required       27     Country     20     Country     8. The corporation stability for interpolitie tax unders in the stability of interpolities of tax unders in the stability of tax unders in tax unde	Suite, Apt #, etc				<b>S</b> \$		
Zep         Trust Fund Contribution         Added to Fees           Zep         Zep         Country         8. This corporation has labeling for intergible fast under a 198 022, Proceed a statute         Yes		27	uga		<u>X</u>	Fee Rec	quired
Part     Part     Points Statutes     Provide Statutes     Provide Statutes       10. Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent       1200 S PINE ISLAND ROAD PLANTATION FL 33324     51     Name     61     Name and Address of New Registered Agent       1200 S PINE ISLAND ROAD PLANTATION FL 33324     61     Name     61     Name and Address of New Registered Agent       64     City     FL     65     Zip Code       7. Transmit to the provisions of Scietons G3 Debtors Such charge was subhorized by the corporation submits this statement for the purpose of changing its registered agent it and mainer with, and accept the dispation 67.0500, Fordia Statudes.     Fordia Statudes.       NATURE     P     Cit Cit RS AND Difficit Codes.     Fordia Statudes.       P     Cit Cit RS AND Difficit Codes.     Fordia Statudes.     Fordia Statudes.       Cit Index Registered Agent and the transition.     Fordia Statudes.     Fordia Statudes.       Cit Index Registered Agent and the transition.     Fordia Statudes.     Fordia Statudes.       Cit Index Registered Agent and the transition.     Fordia Statudes.     Fordia Statudes.       Cit Index Registered Agent and the transition.     Fordia Statudes.     Fordia Statudes.       Cit Index Registered Agent and the transition.     Fordia Statudes.     Fordia Statudes.       Cit Inde Statudes Statudes.     Fordia Statudes.							
	' <u></u> 1	i i i i i i i i i i i i i i i i i i i		· · · · ·			199.032,
C + COPYONE SIGNED     1200 S PRIOR ESLAND ROAD     PLANTATION FL 33324      B2     Street Address (P.O. Box Number is Not Acceptable)     B3     B4     City	9. Name and Address of	of Current Registered Agent			gistered Age	nt	
PLANTATION FL 33324       B3         P4       City       FL       65       Zip Code         Thereased is the the prevenence of Societies 607 DIOP and 627 1508. Florida Statutes, the above named corporation submits this statement for the puppose of changing its registered of the originant and therease authorized by the corporation's board of directors. Thereby accept the appointment as registered of the originant and thereased multiple targets preventiant is the prevention of Code of Code. Fordia Statutes.       DME         SNATURE       P       City       FL       65       Zip Code         NATURE       P       City Code of Code. Fordia Statutes.       DME       DME         Itigate registered agent previous equities with appointed with targets and with appointed with appointed agent appainted with appointed agent application and and the targets previous equities and application application.       DME       DME         Itigat Predeo DM DRIVE       13 Sinter ADDRSS       Change       Address         Store Precedom DRIVE       13 Sinter ADDRSS       Change       Address         Itigat Predeo DM DRIVE       23 Sinter ADDRSS       Change       Address         Itigat Predeo DM DRIVE       23 Sinter ADDRSS       Change       Address         Itigat Predeo DM DRIVE       23 Sinter ADDRSS       Change       Address         Itigat Predeo DM DRIVE       23 Sinter ADDRSS       Change       Address				tress (P.O. Box Number is Not Acceptab	le)		
Addition	PLANTATION FL 33324						
Presume to the provisions of Sections 607 0%02 and 607 1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent an above named corporation submits this statement for the purpose of changing its registered agent and accept the obligations of Section 60 2605, Florida Statutes.  SNATUFE  State preference of agent and accept the obligations of Section 60 2605, Florida Statutes.  NATUFE  State preference of agent and accept the obligations of Section 60 2605, Florida Statutes.  NATUFE  State preference of agent and accept the obligations of Section 60 2605, Florida Statutes.  NATUFE  State preference of agent and accept the obligations of Section 60 2605, Florida Statutes.  NATUFE  State preference of agent and accept agent and the impricate COPPORT Section 60 2605, Florida Statutes.  NATUFE  State preference of agent and accept agent and the impricate COPPORT Section 60 2605, Florida Statutes.  NATUFE  State preference of agent and accept agent and the impricate COPPORT Section 60 2605, Florida Statutes.  NATUFE  State preference of agent and accept agent and the impricate COPPORT Section 60 2605, Florida Statutes.  NATUFE  State preference of agent and the impricate COPPORT Section 60 2605, Florida Statutes.  NATUFE  State preference of agent and the impricate COPPORT Section 60 2605, Florida Statutes.  NATUFE  State preference of agent and the impricate COPPORT Section 60 2605, Florida Statutes.  NATUFE  State preference of agent and the impricate COPPORT Section 60 2605, Florida Statutes.  Statutes  Stat						<u>el 750 0</u>	
office or registricind 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 are interesting with, and accept the obligations of Sector Boothas Statutes.         SNATURE       Solar and accept the obligations of Sector Boothas Statutes.         Mark and accept the obligations of Sector Boothas Statutes.       OFFICE PS AND DIRECTORS         SNATURE       OFFICE PS AND DIRECTORS       13.         KENEFICK, JAMES F       1 PLEFE         11921 FREEDOM DRIVE       1 STREET ADDRESS         SS A       DELEFE       1 TITLE         LERA, THOMAS M       2 SINET ADDRESS         11921 FREEDOM DRIVE       3 SINET ADDRESS         11921 FREEDOM DRIVE			B4 City				lode
KENEFICK, JAMES F       12 MME         EEL ADDRESS       11921 FREEDOM DRIVE         ASI ZP       RESTON VA 22090         F       SD         C       SD         ELERA, THOMAS M       21 TITLE         LERA, THOMAS M       22 NAME         11921 FREEDOM DRIVE       23 STRET ADDRESS         ALCITY-ST-ZP       23 STRET ADDRESS         FST-ZP       RESTON VA 22090         F       31 STRET ADDRESS         FST-ZP       RESTON VA 22090         F       31 STRET ADDRESS         FST-ZP       RESTON VA 22090         F       31 STRET ADDRESS         SST-ZP       Change         ACITY-ST-ZP         F       31 STRET ADDRESS         SSTRET ADDRESS       32 STRET ADDRESS         SST-ZP       34 CITY-ST-ZP         F       DELETE         ST-ZP       34 CITY-ST-ZP         F       DELETE         STRET ADDRESS         SST-ZP       42 CITY-ST-ZP         F       DELETE         STRET ADDRESS       43 STRET ADDRESS         SST-ZP       STRET ADDRESS         SST-ZP       STRET ADDRESS         SSTRET ADDRESS       STRET ADDR	Pursuant to the provisions of Sections office or registered agent, or both, in	s 607 0502 and 607,1508, Florida Statut the State of Florida, Such change was a	es the above-named cor	poration submits this statement for the p alion's board of directors. I hereby accep		anging its	registered
EET ADRESS       11921 FREEDOM DRIVE RESTON VA 22090       14 GTV-ST-2/P         F       SD       DELETE       21 TITLE         F       SD       DELETE       21 TITLE         FE LERA, THOMAS M       22 NAVE       23 STRET ADDRESS         FESTON VA 22090       2 4 GTV-ST-2/P       Addition         FE LEAR, THOMAS M       11921 FREEDOM DRIVE       23 STRET ADDRESS         FESTON VA 22090       2 4 GTV-ST-2/P       Change       Addition         FE LADRESS       33 STREET ADDRESS       33 STREET ADDRESS       33 STREET ADDRESS         FE LADRESS       33 STREET ADDRESS       33 STREET ADDRESS       34 GTV-ST-2/P         FE LADRESS       33 STREET ADDRESS       44 GTV-ST-2/P       44 GTV-ST-2/P         FE LADRESS       43 STREET ADDRESS       44 GTV-ST-2/P       44 GTV-ST-2/P         FE LADRESS       43 STREET ADDRESS       44 GTV-ST-2/P       44 GTV-ST-2/P         FE LADRESS       53 STRET ADDRESS       53 STRET ADDRESS       53 STRET ADDRESS         FST /P       STRET ADDRESS       53 STRET ADDRESS       53 STRET ADDRESS         FE ADRESS       53 STRET ADDRESS       53 STRET ADDRESS       53 STRET ADDRESS         FST /P       STRET ADRESS       53 STRET ADRESS       53 STRET ADRESS       53 STRET ADRESS	office or registered agent, or both, in agent. I am familiar with, and accept sNATURE	the State of Florida, Such change was a the obligations of, Section 607,0505, Flo generating and title tappicable (NOT	es, the above-hamed cor authorized by the corpora trida Statutes.	ation's board of directors. I hereby accep	UPDOSE OF Cha purpose of cha the appoint	anging its ment as r	egistered egistered
F       SD       DELETE       21 TITLE       Change       Addition         EE       LERA, THOWAS M       22 NAVE       23 STREET ADDRESS       1921 FREEDOM DRIVE       23 STREET ADDRESS <cd><cd><cd><cd><cd><cd><cd><cd><cd><c< td=""><td>office or registered agent, or both, in agent. I am familiar with, and accept sNATURE Standard Standard President can entry OFFIC</td><td>the State of Florida, Such change was a the obligations of, Section 607,0505, Flo generation of the supersable (NOT CERS AND DIRECTORS</td><td>es, the above-named cor authorized by the corpore brida Statutes. E. Registered Agent signature req. 13. 1.1 IffLE</td><td>ation's board of directors. I hereby accep</td><td>DATE</td><td>anging its ment as r RECTORS</td><td>s registered egistered S IN 12</td></c<></cd></cd></cd></cd></cd></cd></cd></cd></cd>	office or registered agent, or both, in agent. I am familiar with, and accept sNATURE Standard Standard President can entry OFFIC	the State of Florida, Such change was a the obligations of, Section 607,0505, Flo generation of the supersable (NOT CERS AND DIRECTORS	es, the above-named cor authorized by the corpore brida Statutes. E. Registered Agent signature req. 13. 1.1 IffLE	ation's board of directors. I hereby accep	DATE	anging its ment as r RECTORS	s registered egistered S IN 12
E       LERA, THOMAS M 11921 FREEDOM DRIVE RESTON VA 22090       22 NAME         -S1-2P       2 4 OTY-ST-ZIP         F       DELETE         3.1 TILE       Change         3.2 NAME       33 STREET ADDRESS         -S1-2P       -	office or registered agent, or both, in agent. Lam familiar with, and accept SNATURE Statute: typed or production entrie OFFIC P KENEFICK, JAMES F 11921 FREEDOM DRI	the State of Florida, Such change was a the obligations of, Section 607,0505, Flo gelered agent and title 1 applicable (NOT CERS AND DIRECTORS DELETE	es, the above-named cor authorized by the corpore prida Statutes. E. Registered Agent signature req. 13. 1.1 TifLE 1.2 NAME	ation's board of directors. I hereby accep	DATE	anging its ment as r RECTORS	s registered egistered S IN 12
S1-24P       RESTON VA 22090       2.4 CITY-S1-ZIP         F       DELETE       9.1 TitLE       Change       Addition         AD-AD-RESS       33 STREET ADDRESS       33 STREET ADDRESS         -51-24P	office or registered agent, or both, in agent. Lam familiar with, and accept SNATURE Stables typeffic packstane of the OFFIC P KENEFICK, JAMES F 11921 FREEDOM DRI RESTON VA 22090	the State of Florida. Such change was a the obligations of Section 607.0505, Flo spelered agent and title 1 approable (NOT CERS AND DIRECTORS DELETE	es, the above-named cor authorized by the corpore prida Statutes. E. Registered Agent signature requ 13. 1.1 TIFLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ation's board of directors. I hereby accep	DATE	RECTORS	S IN 12
E       DELETE       9.1 TITLE       Change       Addition         F       3.3 STREET ADDRESS       3.3 STREET ADDRESS       3.4 CiTY-S1-2iP         F       DELETE       4.1 TITLE       Change       Addition         F       DELETE       5.1 TITLE       Change       Addition         F       DELETE       6.1 TITLE       Change <td>office or registered agent, or both, in agent. I am familiar with, and accept SNATURE Standard or both and accept of the Standard of the Stand</td> <td>the State of Florida. Such change was a the obligations of Section 607.0505, Flo spelered agent and tile Lappicable (NOT CERS AND DIRECTORS DELETE VE</td> <td>es, the above-named cor authorized by the corpore prida Statutes. E. Registered Agent signature req. <b>13.</b> 1.1 TifLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CiTY-ST-ZIP 2.1 TIFLE</td> <td>ation's board of directors. I hereby accep</td> <td>DATE</td> <td>RECTORS</td> <td>S IN 12</td>	office or registered agent, or both, in agent. I am familiar with, and accept SNATURE Standard or both and accept of the Standard of the Stand	the State of Florida. Such change was a the obligations of Section 607.0505, Flo spelered agent and tile Lappicable (NOT CERS AND DIRECTORS DELETE VE	es, the above-named cor authorized by the corpore prida Statutes. E. Registered Agent signature req. <b>13.</b> 1.1 TifLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CiTY-ST-ZIP 2.1 TIFLE	ation's board of directors. I hereby accep	DATE	RECTORS	S IN 12
4 I ADURESS       33 STREET ADDRESS         -S1-2iP       34 CITY-S1-2iP         F       DELETE         4 CITY-S1-2iP         F       DELETE         4 CITY-S1-2iP         F       DELETE         4 CITY-S1-2iP         F       DELETE         4 CITY-S1-2iP         F       Change         Addition         4.2 NAME         4.3 STREET ADDRESS         -S1-2iP         4.4 CITY-S1-2iP         F         DELETE         51 TITLE         Change         Addition         4.4 CITY-S1-2iP         F         Change         Addition         4.4 CITY-S1-2iP         F         F         S1 STREET ADDRESS         -S1 ZiP         F         S1 TITLE         S1 STREET ADDRESS         -S1 ZiP         F         F         S1 STREET ADDRESS         -S1 ZiP         F         F         S1 ADDRESS         -S1 ZiP         F         S1 STREET ADDRESS	office or registered agent, or both, in agent. Lam familiar with, and accept SNATURE Strate: Nyetter participation of the OFFIC P KENEFICK, JAMES F 11921 FREEDOM DRI RESTON VA 22090 SD LERA, THOMAS M 11921 FREEDOM DRI	the State of Florida. Such change was a the obligations of Section 607.0505, Flo spelered agent and tile Lappicable (NOT CERS AND DIRECTORS DELETE VE	es, the above-named con authorized by the corpore prida Statutes. E. Registered Agent signature reg. 13. 1.1 TiTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	ation's board of directors. I hereby accep	DATE	RECTORS	S IN 12
- S1-ZIP       34 CITY-S1-ZIP         F       DELETE       4.1 TITLE         LE       Addition         4.2 NAME       4.3 STREET ADDRESS         - S1-ZIP       4.4 CITY-ST-ZIP         E       DELETE         S1-ZIP       4.4 CITY-ST-ZIP         E       DELETE         S1-ZIP       4.4 CITY-ST-ZIP         E       DELETE         S1 TITLE       Change         Addition       5.2 NAME         H1 ADDRESS       5.3 STREET ADDRESS         -S7-ZiP       54 CITY-ST-ZiP         F       DELETE         S1 TITLE       Change         Addition       5.2 NAME         -S7-ZiP       54 CITY-ST-ZiP         F       DELETE       6.1 TITLE         S2 NAME       6.2 NAME         EE1 ADDRESS       6.3 STREET ADDRESS         -S1-ZiP       Change       Addition         EE1 ADDRESS       6.3 STREET ADDRESS         -S1-ZiP       Change       Addition         LI ADDRESS       6.3 STREET ADDRESS         -S1-ZiP       Change       Addition         LI ADDRESS       6.4 CITY-ST-ZiP         LI ADDRESS       6.4 CITY-ST-ZiP	office or registered agent, or both, in agent. Lam familiar with, and accept Standard Standar	the State of Florida. Such change was a the obligations of Section 607.0505, Flo opeled agent and file 1 approable (NOT CF RS AND DIRECTORS DELETE VE DELETE	es, the above-named con authorized by the corpore prida Statutes. E. Registered Agent signature reg. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	ation's board of directors. I hereby accep	DATE	Anging its ment as r RECTORS Change	S IN 12
Image: Provide the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(0), Florida Statutes. I further certify that the	office or registered agent, or both, in agent. Lam familiar with, and accept SNATURE Bighter typellin participant of the OFFIC P E KENEFICK, JAMES F 11921 FREEDOM DRI RESTON VA 22090 SD E LERA, THOMAS M 11921 FREEDOM DRI ST-ZIP RESTON VA 22090 E	the State of Florida. Such change was a the obligations of Section 607.0505, Flo opeled agent and file 1 approable (NOT CF RS AND DIRECTORS DELETE VE DELETE	Es, the above-named con authorized by the corpore orida Statutes. E: Registered Agent signature reg. 13. 1.1 TifLE 1.2 NAME 1.3 STREET ADDRESS 1.4 City-St-ZiP 2.1 TifLE 2.2 NAME 2.3 STREET ADDRESS 2.4 City-St-ZiP 3.1 TifLE 3.2 NAME	ation's board of directors. I hereby accep	DATE	Anging its ment as r RECTORS Change	S IN 12
ELF ADDRESS       43 STREET ADDRESS         -SE-2P       44 CITY-ST-ZIP         E       DELETE         51 TITLE       Change         ME       52 NAME         FF1 ADDRESS       53 STREET ADDRESS         -SP-ZP       54 CITY-ST-ZIP         F       DELETE         64 CITY-ST-ZIP       Change         Addition       53 STREET ADDRESS         -SP-ZP       54 CITY-ST-ZIP         F       DELETE         6.1 TITLE       Change         Addition       62 NAME         62 NAME       63 STREET ADDRESS         -S1-ZP       63 STREET ADDRESS         -S1-ZP       63 STREET ADDRESS         -S1-ZP       64 CITY-ST-ZP         I do horepy certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(0), Florida Statutes. I further certify that the	office or registered agent, or both, in agent. Lam familiar with, and accept SNATURE Stable: typedic packstaine of the OFFIC P KENEFICK, JAMES F I 1921 FREEDOM DRI RESTON VA 22090 SD LERA, THOMAS M 11921 FREEDOM DRI RESTON VA 22090 F E E H ADDRESS	the State of Florida. Such change was a the obligations of Section 607.0505, Flo opeled agent and file 1 approable (NOT CF RS AND DIRECTORS DELETE VE DELETE	es, the above-named con authorized by the corpore prida Statutes. E: Registered Agent signature required 13. 1.1 TIFLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIFLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TIFLE 3.2 NAME 3.3 STREET ADDRESS	ation's board of directors. I hereby accep	DATE	Anging its ment as r RECTORS Change	s registered egistered S IN 12 Addition
C-SI-2IP       44 CITY-ST-2IP         E       DELETE         Addition         At         At         At         DELETE         S1 TITLE         Change         Addition         At         Change         Addition         S2 NAME         S3 STREET ADDRESS         C-S1-2IP         F         DELETE         S1 TITLE         Change         Addition         62 NAME         63 STREET ADDRESS         Change         Addition         62 NAME         63 STREET ADDRESS         Change         Addition         62 NAME         63 STREET ADDRESS         Change         Addition         63 STREET ADDRESS         Change         Change         Addition         63 STREET ADDRESS         Change         Change         Addition         64 CITY-ST-ZIP         I do horeby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(0), Florida Statutes. I further c	office or registered agent, or both, in agent. Lam familiar with, and accept SNATURE Strate: operation participation of the OFFIC P KENEFICK, JAMES F I 1921 FREEDOM DRI RESTON VA 22090 SD LERA, THOMAS M 11921 FREEDOM DRI RESTON VA 22090 F E E H ADDRESS -ST-ZIP E	the State of Florida. Such change was a the obligations of Section 607.0505, Flo getered agent and tile 1 approable (NOT CERS AND DIRECTORS DELETE VE DELETE VE	es, the above-named con authorized by the corpore prida Statutes. E. Registered Agent signature required 13. 1.1 TIFLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TIFLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TIFLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TIFLE	ation's board of directors. I hereby accep	L     Jourpose of cha     the appoint     DATE     CONTRACT OF CONTRACT	Anging its ment as r	S IN 12 Addition Addition
HE     52 NAME       HT ADDRESS     53 STREET ADDRESS       -51 70°     54 CiTY-ST-ZIP       F     DELETE       6.1 TITLE     Change       Addition       RE     6.3 STREET ADDRESS       -51 70°     6.4 CiTY-ST-ZIP       -51 70°     6.4 CiTY-ST-ZIP	office or registered agent, or both, in agent. Lam familiar with, and accept SNATURE Enclose States - States - ST-2iP E E E E E E E E E E E E E E E E E E E	the State of Florida. Such change was a the obligations of Section 607.0505, Flo getered agent and tile 1 approable (NOT CERS AND DIRECTORS DELETE VE DELETE VE	es, the above-named con authorized by the corpore prida Statutes. E. Registered Agent signature req. <b>13.</b> 1.1 TifLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CiTY-ST-ZIP 2.1 TIFLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CiTY-ST-ZIP 3.1 TIFLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CiTY-ST-ZIP 4.1 TIFLE 4.2 NAME	ation's board of directors. I hereby accep	L     Jourpose of cha     the appoint     DATE     CONTRACT OF CONTRACT	Anging its ment as r	S IN 12 Addition Addition
E1 ADDRESS     53 STREET ADDRESS       -S <sup>1</sup> /2 <sup>(P)</sup> 54 CITY-ST-ZIP       F     DELETE       6,1 TITLE     Change       Addition       EET ADDRESS       -S1-2P       I do horeby 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	office or registered agent, or both, in agent. Lam familiar with, and accept SNATURE Enclose States - States - States ELADDRESS -ST-ZIP E E ELADDRESS -ST-ZIP E E E ELADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E	the State of Florida. Such change was a the obligations of Section 607.0505, Flo agelered agent and tile Tappicable (NOT CFRS AND DIRECTORS DELETE VE DELETE VE DELETE DELETE	es, the above-named con authorized by the corpore prida Statutes. E Registered Agent signature requinance <b>13.</b> 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP	ation's board of directors. I hereby accep	DATE	Change Change Change	S IN 12 Addition
F     DELETE     6.1 TITLE     Change     Addition       IE     6.2 NAME     6.3 STREET ADDRESS     6.3 STREET ADDRESS       -S1-ZP     6.4 CITY-ST-ZIP       I do horeby 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	office or registered agent, or both, in agent. Lam familiar with, and accept SNATURE Electropess -SE-ZP P KENEFICK, JAMES F 11921 FREEDOM DRI RESTON VA 22090 SD LERA, THOMAS M 11921 FREEDOM DRI RESTON VA 22090 F E ELADDRESS -ST-ZP RESTON VA 22090 F E E ELADDRESS -ST-ZP F E E	the State of Florida. Such change was a the obligations of Section 607.0505, Flo agelered agent and tile Tappicable (NOT CFRS AND DIRECTORS DELETE VE DELETE VE DELETE DELETE	es, the above-named con authorized by the corpore prida Statutes. E. Registered Agent signature req. <b>13.</b> 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE	ation's board of directors. I hereby accep	DATE	Change Change Change	S IN 12 Addition
ET ADDRESS     ET ADDRESS     STREET ADDRESS     G.3 STREET ADDRESS     G.4 CITY-ST-ZIP     T do horeby 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	office or registered agent, or both, in agent, I am familiar with, and accept NATURE Electropediate preterment of the office off	the State of Florida. Such change was a the obligations of Section 607.0505, Flo agelered agent and tile Tappicable (NOT CFRS AND DIRECTORS DELETE VE DELETE VE DELETE DELETE	es, the above-named con authorized by the corpore prida Statutes. E. Registered Agent signature registration <b>13.</b> 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	ation's board of directors. I hereby accep	DATE	Change Change Change	S IN 12 Addition
-SL-2P I do horeby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the	office or registered agent, or both, in agent. Lam familiar with, and accept iNATURE Electron preterment of the OFFIC P KENEFICK, JAMES F I 1921 FREEDOM DRI RESTON VA 22090 SD LERA, THOMAS M 11921 FREEDOM DRI ST-ZIP RESTON VA 22090 E E LERA, THOMAS M 11921 FREEDOM DRI RESTON VA 22090 E E E E E HADDRESS -S1-ZIP E E E E HADDRESS -S1-ZIP	the State of Florida. Such change was a the obligations of Section 607.0505, Flo genered agent and tile 1 approable (NOT CF RS AND DIRECTORS DELETE VE DELETE VE DELETE DELETE DELETE DELETE	es, the above-named con authorized by the corpore prida Statutes. E. Registered Agent signature reg. <b>13.</b> 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	ation's board of directors. I hereby accep		Anging its ment as response of the second se	s registered egistered S IN 12 Addition Addition
I do horeby 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	office of registered agent, or both, in agent. Lam familiar with, and accept SNATURE Standard by P E Biglate - typedic packstane of the OFFIC P E KENEFICK, JAMES F 11921 FREEDOM DRI RESTON VA 22090 SD LERA, THOMAS M 11921 FREEDOM DRI RESTON VA 22090 F E E E HADRESS -S1-ZIP E E E E HADRESS -S1-ZIP E E	the State of Florida. Such change was a the obligations of Section 607.0505, Flo genered agent and tile 1 approable (NOT CF RS AND DIRECTORS DELETE VE DELETE VE DELETE DELETE DELETE DELETE	es, the above-named con authorized by the corpore rida Statutes. E Registered Agent signature reg. <b>13.</b> 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE	ation's board of directors. I hereby accep		Anging its ment as response of the second se	s registered egistered S IN 12 Addition Addition
information indicated on this annual report or suppremental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that	office or registered agent, or both, in agent. Lam familiar with, and accept SNATURE Stipulate typedic performents of FIC P E EXADRESS -ST-ZIP E E EXADRESS -ST-ZIP	the State of Florida. Such change was a the obligations of Section 607.0505, Flo genered agent and tile 1 approable (NOT CF RS AND DIRECTORS DELETE VE DELETE VE DELETE DELETE DELETE DELETE	es, the above-named con authorized by the corpore orida Statutes. E: Registered Agent signature reg. 13. 1.1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 City-St-ZiP 2.1 Title 2.2 NAME 2.3 STREET ADDRESS 2.4 City-St-ZiP 3.1 Title 3.2 NAME 3.3 STREET ADDRESS 3.4 City-St-ZiP 4.1 Title 4.2 NAME 4.3 STREET ADDRESS 3.4 City-St-ZiP 5.1 Title 5.2 NAME 5.3 STREET ADDRESS 5.4 City-St-ZiP 5.1 Title 5.2 NAME 5.3 STREET ADDRESS 5.4 City-St-ZiP 6.1 Title 6.2 NAME 6.3 STREET ADDRESS	ation's board of directors. I hereby accep		Anging its ment as response of the second se	s registered egistered S IN 12 Addition Addition