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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997

**OC INCORPORATED** 



DOCUMENT # F9300001967 (9)

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

**DIVISION OF CORPORATIONS** 

## **FILED** Jun 20 1997 8:00am Secretary of State

		<b>a</b> jja bili: 1881 (1881

Principal Plac	ce of Business	Mailing Address	<del></del>			-{	8800 BEIRNA			
5440 CHEROKEE AVE ALEXANDRIA VA 22312 US		5440 CHEROKEE AVE ALEXANDRIA VA 22312-23 US	ALEXANDRIA VA 22312-2303							
			•			3. Date Incorporated or Qualified	1	of Last F	Report	
9 Principal P	Place of Business	De Mailing Address				04/26/1993	10/0	1/1996		
2. Principal Place of Business 2a. Mailing Addres 2b. 2c. 2c. Mailing Addres 2c.			<b>;</b>			4. FEI Number 54-1441441		· · · · · · · · · · · · · · · · · · ·	pplied For of Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	······································			1	AO TE			
22		27				5. Certificate of Status Desired	X		equired	
I CIIVA SIAI	te	+ ´	City & State			6. Election Campaign Financing			May Be	
Zip Country		···	Zip Country		Trust Fund Contribution Added to Fees					
24	25	29	- <b>,</b> '			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No				
	9. Name and Address of Curre		1901	T		10. Name and Address of New Reg				
RFC	RRY, GERALD L			81	Name		1010104111	,0111		
	43 RESEARCH PARKWAY			20	0) (4)	(60 b)				
SUITE 303				82	Street Addre	ess (P.O. Box Number is Not Acceptab	e)			
ORLANDO FL 32826				83						
ر س				84	City			<b>85</b> Zip	Code	
-43 8					•		<u>FL</u>		ľ	
office or i	to the provisions of Sections 607.05 registered agent, or both, in the State	02 and 607.1508, Florida Statut e of Florida. Such change was :	les, the al authorize	bove d by	-named corpo the corporatio	oration submits this statement for the proofs board of directors. I hereby accep	urpose of c t the appoi	hanging it ntment as	ts registered registered	
	am familiar with, and accept the obliq	gations of, Section 607.0505, Fi	orida Stat	lules		, , ,				
SIGNATURE	Signature, typed or printed name of registered ag	ient and title if applicable. (NOI	F Registere	d Aper	nt signature required	d when reinstation)	DATE			
12.		ID DIRECTORS	13.		k digitalisto roquiro	ADDITIONS/CHANGES TO OFFICE		IRECTOF	RS IN 12	
TITLE	PC	☐ DELETE	1.1 1	TLE				Change	Addition	
NAME	PLUNKETT, CHARLES L		1.2 N	AME					[]	
STREET ADDRESS 1200 CRYSTAL DRIVE			1.3 STREET ADDRES		ADDRESS					
CITY-ST-ZIP	ARLINGTON VA 22202			TY-ST	-ZIP				:	
TITLE	V	☐ DELETE	2.1 Ti				L.	_] Change	Addition	
NAME OTOTET ADDRESS	MCCORMACK, DONALD A 301 MEADOW LANE		2.2 NAME			···.				
STREET ADORESS	VIENNA VA 22180				ADDRESS	•				
CITY-ST-ZIP	\$	☐ DELETE	3.1 TI	17Y - S1	1-211			Change	Addition	
NAME	TUMLIN, GRADY		3.2 N/				L	_ onango		
STREET ADDRESS	4339 STREAM BED WAY				ADDRESS					
CITY-ST-ZIP	ALEXANDRIA VA		3.4. C	IY-SI	1 - ZIP				-	
TITLE		☐ DELETE	4.1 TI	TLE				Change	Addition	
NAME			4. 2 N	AME						
STREET ADDRESS			4.3 ST	REET A	address					
CITY-ST-ZIP	<u> </u>	Driete		TY-ST	- ZIP			T		
TITLE		DELETE	5.1 TO				L	Change	Addition	
name Street åddress			5.2 NA							
CITY-ST-ZIP	(.)				ADDRESS					
TITLE		DELETE	5.4 CI 6.1 TI	TY-ST TIF	- ZIP		Г	Change	Addition	
NAME			6.2 NA				L	i onange	Addition	
STREET ADDRESS					ADDRESS					

6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this information indicated on this annual report or supplies that I am an officer or director of the corporation or the receipt appears in Block 12 or Block 13 if changed, on an attact og does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name ment with an address