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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

May 11 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

CITY-ST-ZIP

F9300001967 (9)

**OC INCORPORATED** 

Principal Place of Business Mailing Address				i realide tile istes mitt dent detti belit belit belit belit isti tili belit tili belit tili isti tili tili til	
5440 CHEROKEE AVE ALEXANDRIA VA 22312 US		5440 CHEROKEE AVE ALEXANDRIA VA 22312 US			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified
					04/26/1993
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number Applied For
21		[26]			<b>54-1441441</b> Not Applicable
Suite, Apl. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional
22		27			Fee Required
City & Star 23	te	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country		Zip			8. This corporation owes or has paid the current year Intangible
24	25 9. Name and Address of Curren	1 Peristand Agent	30		Personal Property Tax due June 30. Pres No  10. Name and Address of New Registered Agent
		ı neğistelen Ağelir	81	Name	
	ERRY, GERALD L				
12443 RESEARCH PARKWAY SUITE 303			82	Street	Address (P.O. Box Number is Not Acceptable)
	RL <b>AN</b> DO FL 32826		83	1	
"	IDANDO I C OZOZO		<u> </u>		
			84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statu	tes, the abov	e-named	corporation submits this statement for the purpose of changing its registered
agent. La	<b>registere</b> d agent, or both, in the State am <b>fa</b> miliar with, and accept the obliga	or Fiorida. Such chan <b>ge wa</b> s itions of, Section 607.05 <b>0</b> 5, FI	autriorized b orida Statuto	iy the corp is.	poration's board of directors. I hereby accept the appointment as registered
SIGNATURE					
	Signature, type d'or prent d'name o' registen d'ager			ent signature	e required wher reinstating) DATE
12.	OFFICERS AND	TORR CTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	BLANDER GLANDER I		1.2 NAME		Colonia Employee
STREET ADDRESS 1200 CRYSTAL DRIVE			1.3 STREET ADDRESS		
CITY-ST-ZIP ARLINGTON VA 22202		1.4 CHY - SI - ZIP			
TITLE	V	DELETE 211		<u> </u>	Change Addition
NAME	MCCORMACK, DONALD A		2.2 NAME		A a
STREET ADDRESS 301 MEADOW LANE			2.3 STREET ADDRESS		
CITY-ST-ZIP	VIENNA VA 22180		2. 4 CiTY - ST - ZIP		
TITLE	8	☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS 4339 STREAM BED WAY CITY-ST-ZIP ALEXANDRIA VA			3.3 STREET ADDRESS		
CITY-ST-ZIP ALEXANDRIA VA		DELETE	3.4. CITY - ST - ZIP  DELETE 4.1 TITLE		Change Addition
NAME			4, 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE			5.1 TITLE	· · ·	☐ Change ☐ Addition
NAME		5.2 NAME			
STREET ADDRESS 538		53 STREE	T ADDRESS		
CITY-ST-ZIP			5.4 CITY-	S1 - 71P	
TITLE		☐ DELETE	6 1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			63 STREE	T ADDRESS	

14. Thereby 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 information indicated on this annual report or supplement 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 acceiver of trushed 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, or on a allacting my with an address.