

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P27834 (1)**

1. Corporation Name  
**OEHME, VAN SWEDEN AND ASSOCIATES, INC.**



Principal Place of Business: **800 G STREET, S.E. WASHINGTON DC 20003**  
 Mailing Address: **800 G STREET, S.E. WASHINGTON DC 20003**

3. Date Incorporated or Qualified: **01/23/1990**  
 3a. Date of Last Report: **02/28/1995**  
 4. FLE Number: **52-1101783**  
 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 has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: 21 State, Apt. #, etc.; 22 City & State; 23 Zip; 24 Country  
 2a. Mailing Address: 26 State, Apt. #, etc.; 27 City & State; 28 Zip; 29 Country

**9. Name and Address of Current Registered Agent**

**CT CORPORATION SYSTEM  
 1200 S. 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

Signature of the person who is the registered agent or the person to be appointed as registered agent

Signature of the person to be appointed as registered agent

DATE

**OFFICERS AND DIRECTORS**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

12. OFFICERS AND DIRECTORS  
 12.1 TITLE: **PTD**  
 12.2 NAME: **VAN SWEDEN, JAMES A.**  
 12.3 STREET ADDRESS: **2813 N. ST., N.W. WASHINGTON DC**  
 12.4 CITY-STATE-ZIP: **VSD**  
 12.5 TITLE: **TURNER, CHARLES E.**  
 12.6 NAME: **800 G ST., S.E. WASHINGTON DC**  
 12.7 STREET ADDRESS: **CD**  
 12.8 CITY-STATE-ZIP: **OEHME, WOLFGANG**  
 12.9 NAME: **511-A WEST JOPPA RD. BALTIMORE MD**  
 12.10 STREET ADDRESS: **DELETE**  
 12.11 CITY-STATE-ZIP: **DELETE**  
 12.12 NAME: **DELETE**  
 12.13 STREET ADDRESS: **DELETE**  
 12.14 CITY-STATE-ZIP: **DELETE**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
 13.1 TITLE:  Change  Addition  
 13.2 NAME:  
 13.3 STREET ADDRESS:  
 13.4 CITY-STATE-ZIP:  
 13.5 TITLE:  Change  Addition  
 13.6 NAME:  
 13.7 STREET ADDRESS:  
 13.8 CITY-STATE-ZIP:  
 13.9 TITLE:  Change  Addition  
 13.10 NAME:  
 13.11 STREET ADDRESS:  
 13.12 CITY-STATE-ZIP:  
 13.13 TITLE:  Change  Addition  
 13.14 NAME:  
 13.15 STREET ADDRESS:  
 13.16 CITY-STATE-ZIP:

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, or on an attachment with an address.

SIGNATURE: **James A. van Sweden** 1-19-96 202-546-7575  
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)