

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000003221

FILED  
Apr 22, 2009  
Secretary of State

Entity Name: WILLIAM A. GRAHAM COMPANY

## Current Principal Place of Business:

THE GRAHAM BUILDING  
ONE PENN SQUARE WEST  
PHILADELPHIA, PA 19102

## New Principal Place of Business:

## Current Mailing Address:

THE GRAHAM BUILDING  
ONE PENN SQUARE WEST  
PHILADELPHIA, PA 19102

## New Mailing Address:

FEI Number: 23-1570876      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DCEO ( ) Delete  
Name: GRAHAM, WILLIAM A IV  
Address: 828 CONSHOHOCKEN STATE ROAD  
City-St-Zip: GLADWYNE, PA 19035

Title: VD ( ) Delete  
Name: MITCHELL, MICHAEL J  
Address: 1295 BRIGHTON WAY  
City-St-Zip: NEWTOWN SQUARE, PA 19073

Title: VD ( ) Delete  
Name: EWELL, KENNETH L  
Address: 8 PENNY LANE  
City-St-Zip: MEDFORD, NJ 08055

Title: V ( ) Delete  
Name: A. PETER PRINSEN, ESQUIRE  
Address: 223 SOUTH 24TH STREET  
City-St-Zip: PHILADELPHIA, PA 19103

Title: VS (X) Delete  
Name: JONES, MARGARET C  
Address: 131 SUGARTOWN ROAD  
City-St-Zip: DEVON, PA 19333

Title: V (X) Delete  
Name: LEIGHTON, MICHELLE M  
Address: 4 PEBBLE LANE  
City-St-Zip: BLACKWOOD, NJ 08012

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL J. MITCHELL

VD

04/22/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date