

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 252387

FILED  
Jul 07, 2008  
Secretary of State

Entity Name: SOUTHERN OIL RESIN & FIBERGLASS INC

## Current Principal Place of Business:

7500 GRACE DRIVE  
COLUMBIA, MD 21044

## New Principal Place of Business:

## Current Mailing Address:

C/O MOLLIE K SPRINKLE  
7500 GRACE DR  
COLUMBIA, MD 21044

## New Mailing Address:

FEI Number: 23-0882523      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012607 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: MCGOWAN, W. BRIAN  
Address: 7500 GRACE DR.  
City-St-Zip: COLUMBIA, MD 21044

Title: DVPT ( ) Delete  
Name: TAROLA, ROBERT M  
Address: 7500 GRACE DR  
City-St-Zip: COLUMBIA, MD 21044

Title: AT ( ) Delete  
Name: FILON, ELYSE  
Address: 5400 BROKEN SOUND BOULEVARD NW  
City-St-Zip: BOCA RATON, FL 33487

Title: D ( ) Delete  
Name: FESTA, ALFRED E  
Address: 7500 GRACE DR.  
City-St-Zip: COLUMBIA, MD 21044

Title: S ( ) Delete  
Name: MCFARLAND, JOHN A  
Address: 7500 GRACE DRIVE  
City-St-Zip: COLUMBIA, MD 21044

Title: VPAS ( ) Delete  
Name: SHELNITZ, MARK  
Address: 7500 GRACE DR  
City-St-Zip: COLUMBIA, MD 21044

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVPT (X) Change ( ) Addition  
Name: LA FORCE III, HUDSON  
Address: 7500 GRACE DR  
City-St-Zip: COLUMBIA, MD 21044

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: JOHN A. MCFARLAND

S

07/07/2008

Electronic Signature of Signing Officer or Director

Date