

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 24, 2008 08:00 AM
Secretary of State

DOCUMENT # F00000004149

1. Entity Name
GOTWALS ASSOCIATES, INC.



Principal Place of Business

P.O. BOX 56
OLEY, PA 19547

Mailing Address

P.O. BOX 56
OLEY, PA 19547



02282008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
23-3011358

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PRES
NAME	GOTWALS, ROBERT S
STREET ADDRESS	12 GOTWALS LANE
CITY-ST-ZIP	OLEY, PA 19547
TITLE	VP
NAME	GOTWALS, WILLIAM S
STREET ADDRESS	12 GOTWALS LANE
CITY-ST-ZIP	OLEY, PA 19547
TITLE	VP
NAME	GOTWALS, R. BRENT
STREET ADDRESS	12 GOTWALS LANE
CITY-ST-ZIP	OLEY, PA 19547
TITLE	VP
NAME	GOTWALS, BRADLEY W
STREET ADDRESS	12 GOTWALS LANE
CITY-ST-ZIP	OLEY, PA 19547
TITLE	VP
NAME	RITTENHOUSE, DENNIS R
STREET ADDRESS	12 GOTWALS LANE
CITY-ST-ZIP	OLEY, PA 19547
TITLE	VP
NAME	ROYER, STEVE M
STREET ADDRESS	12 GOTWALS LANE
CITY-ST-ZIP	OLEY, PA 19547

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05/13/08-80052-020 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Dennis Rittenhouse Controller 3-2008
610-9876281