2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 02, 2009
Secretary of State

DOCUMENT# F03000002517

Entity Name: AMMANN & WHITNEY, INC.

Current Principal Place of Business:

96 MORTON STREET
NEW YORK, NY 10014

New Principal Place of Business:

Current Mailing Address:

96 MORTON STREET
NEW YORK, NY 10014

New Mailing Address:

FEI Number: 13-1938052 **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 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

OFFICERS AND DIRECTORS:

Title: S/T ( ) Delete
Name: THIVIERGE, MARK
Address: 345 WEST 58TH ST.
City-St-Zip: NEW YORK, NY 10019

Title: PD ( ) Delete
Name: IVANOFF, NICK
Address: 3 DEXTER DRIVE NORTH
City-St-Zip: BASKING RIDGE, NJ 07920

Title: D ( ) Delete
Name: WOLFF, DERISH
Address: 412 MT. KEMBLE AVENUE
City-St-Zip: MORRISTOWN, NJ 07960

Title: SVP ( ) Delete
Name: LEUTE, CHARLES
Address: 53 ATHENA CT
City-St-Zip: MAHOPAC, NY 10541

Title: SVP ( ) Delete
Name: CHRISTOPER, GAGNON
Address: 5621 DELAFIELD AVENUE
City-St-Zip: RIVERDALE, NY 10761

Title: D ( ) Delete
Name: BERGER, FREDERIC
Address: 2445 M STREET, NW
City-St-Zip: WASHINGTON, DC 20037

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SVP (X) Change ( ) Addition
Name: KNASTER, SAMUEL
Address: 2300 CHESTNUT STREET, SUITES 310/330
City-St-Zip: PHILADELPHIA, PA 19103

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

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

Title: MP (X) Change ( ) Addition
Name: SCHINDLER, JACEK
Address: 1212 E. BROWARD BLVD, SUITE 203
City-St-Zip: FT. LAUDERDALE, FL 33301

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: NICK IVANOFF PD 06/02/2009

Electronic Signature of Signing Officer or Director — Date