

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000006119

Entity Name: THE ORVIS COMPANY, INC.

FILED
Apr 22, 2009
Secretary of State

Current Principal Place of Business:

HISTORIC ROUTE 7A
MANCHESTER, VT 052540798

New Principal Place of Business:

Current Mailing Address:

1711 BLUE HILLS DRIVE
ROANOKE, VA 24012

New Mailing Address:

FEI Number: 03-0215459

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: C () Delete
Name: PERKINS, LEIGH H
Address: HISTORIC ROUTE 7A
City-St-Zip: MANCHESTER, VT 052540798

Title: EV () Delete
Name: PERKINS, DAVID D
Address: HISTORIC ROUTE 7A
City-St-Zip: MANCHESTER, VT 052540798

Title: PCEO () Delete
Name: PERKINS, LEIGH H JR
Address: HISTORIC ROUTE 7A
City-St-Zip: MANCHESTER, VT 052540798

Title: VCC () Delete
Name: BEAN, ROBERT J
Address: HISTORIC ROUTE 7A
City-St-Zip: MANCHESTER, VT 052540798

Title: CFO () Delete
Name: GOWEN, BRIAN C
Address: HISTORIC ROUTE 7A
City-St-Zip: MANCHESTER, VT 052540798

Title: VM () Delete
Name: MCCREADY, RAYMOND
Address: HISTORIC ROUTE 7A
City-St-Zip: MANCHESTER, VT 052540798

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: CFO (X) Change () Addition
Name: BEAN, ROBERT J
Address: HISTORIC ROUTE 7A
City-St-Zip: MANCHESTER, VT 052540798

Title: VCC (X) Change () Addition
Name: WOOD, WILLIAM
Address: HISTORIC ROUTE 7A
City-St-Zip: MANCHESTER, VT 052540798

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: WILLIAM WOOD

VCC

04/22/2009

Electronic Signature of Signing Officer or Director

_____ Date