2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002014

Entity Name: MORGAN RESEARCH CORPORATION

FILED Apr 22, 2008 Secretary of State

| Current Principal Place of Business: | | | | New Principal Place of Business: | | | |
|---|--|--|--------------|--|--------------|-----------------------|-------------------|
| | ADFORD DR LLE, AL 35805 | | | | | | |
| Current Mailing Address: | | | | New Mailing Address: | | | |
| | SON BOULEV ON, VA 22201 | ARD, STE 700 | | | | | |
| FEI Number: | 63-0980295 | FEI Number Applied For () | FEI Numb | ber Not Appli | cable () | Certificate of Statu | ıs Desired () |
| Name and | Address of (| Current Registered Agent: | ı | Name and | Address of | New Registered / | Agent: |
| 1201 HAYS | | CE COMPANY 01 US | | | | | |
| | named entity of Florida. | submits this statement for th | e purpose of | changing it | s registered | office or registered | l agent, or both, |
| SIGNATUR | RE: | | | | | | |
| Electronic Signature of Registered Agent | | | | | | Date | |
| Election Can | npaign Financin | g Trust Fund Contribution (). | | | | | |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | | |
| Title: Name: Address: City-St-Zip: | NOLAN, PHILIF | BOULEVARD, STE 700 | 1 | Title: Name: Address: City-St-Zip: | (|) Change () Addition | |
| Title: Name: Address: City-St-Zip: | KARLSON, WI | BOULEVARD, STE 700 | 1 | Title: Name: Address: City-St-Zip: | (|) Change () Addition | |
| Title: Name: Address: City-St-Zip: | WILSON, GEO | BOULEVARD, STE 700 | 1 | Title: Name: Address: City-St-Zip: | (|) Change () Addition | |
| Title: Name: Address: City-St-Zip: | SEC (CHAPLIN, SCC 3101 WILSON ARLINGTON, V | OTTT D BOULEVARD, STE 700 | 1 | Title: Name: Address: City-St-Zip: | CHAPLIN, SC | N BOULEVARD, STE 7 | |
| Title: Name: Address: City-St-Zip: | KILLEN, AL K |) Delete BOULEVARD, STE 700 (A 22201 | 1 | Title: Name: Address: City-St-Zip: | TORTI, CHRIS | N BOULEVARD, STE 7 | |
| Title: Name: Address: City-St-Zip: | SMITH, CHRIS | BOULEVARD, STE 700 | 1 | Title: Name: Address: City-St-Zip: | (|) Change () Addition | |

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: SCOTT D. CHAPLIN SEC 04/22/2008