


2008 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Apr 14, 2008 08:00 A
Secretary of State

DOCUMENT # F06000006584
 1. Entity Name
JOSEPH B. FAY CO.



Principal Place of Business Mailing Address
100 SKY LANE **P.O. BOX 66**
TARENTUM, PA 15084 **RUSSELLTON, PA 15076**

DO NOT WRITE IN THIS SPACE



04072008 No Chg-P CR2E034 (11/05)

4. FEI Number 25-0930077	Applied For - Not Applicable.
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324

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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 _____ (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 NAME STREET ADDRESS CITY-ST-ZIP	CEO FAY, ROBERT B. JR. P.O. BOX 66 RUSSELLTON, PA 15076
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO FAY, SHAWN M. SR. P.O. BOX 66 RUSSELLTON, PA 15076
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WATKINS, DENNIS P.O. BOX 66 RUSSELLTON, PA 15076
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WILKINSON, JAMES E. P.O. BOX 66 RUSSELLTON, PA 15076
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WESTROM, THOMAS M. P.O. BOX 66 RUSSELLTON, PA 15076
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MS DACEY, ARLEEN F. P.O. BOX 66 RUSSELLTON, PA 15076

U00000333332
 04/23/08-80101-009 150.00

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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:  **04/07/08** **724-265-4600**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #