2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2009
Secretary of State

DOCUMENT# F06000007388

Entity Name: STEPHEN JAMES ASSOCIATES, INC.

Current Principal Place of Business:

7301 PARKWAY DRIVE
HANOVER, MD 21076

New Principal Place of Business:

Current Mailing Address:

C/O RANDALL SONES, 7301 PARKWAY DRIVE
HANOVER, MD 21076

New Mailing Address:

FEI Number: 20-4153942 **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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	WRIGHT, CARL	
Address:	1954 GREENSPRING DRIVE, SUITE 503	
City-St-Zip:	TIMONIUM, MD 21093	
Title:	V	( ) Delete
Name:	SMITH, CARTER W. W.	
Address:	1954 GREENSPRING DRIVE, SUITE 503	
City-St-Zip:	TIMONIUM, MD 21093	
Title:	S	( ) Delete
Name:	SONES, RANDALL D	
Address:	7301 PARKWAY DRIVE	
City-St-Zip:	HANOVER, MD 21076	
Title:	T	( ) Delete
Name:	BUTLER, ALAN	
Address:	7301 PARKWAY DRIVE	
City-St-Zip:	HANOVER, MD 21076	
Title:	C	( ) Delete
Name:	DAVIS, JAMES C	
Address:	7301 PARKWAY DRIVE	
City-St-Zip:	HANOVER, MD 21076	
Title:	D	( ) Delete
Name:	CAREY, JOHN T	
Address:	7301 PARKWAY DRIVE	
City-St-Zip:	HANOVER, MD 21076	

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:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: RANDALL SONES S 01/15/2009

Electronic Signature of Signing Officer or Director — Date