2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2008
Secretary of State

DOCUMENT# F07000001787

Entity Name: JOHN MCCAIN 2008, INC.

Current Principal Place of Business:

1235 CLARK ST
1ST FLOOR
ARLINGTON, VA 22202

New Principal Place of Business:

1235 CLARK ST
M FLOOR
ARLINGTON, VA 22202

Current Mailing Address:

PO BOX 16118
ARLINGTON, VA 22215

New Mailing Address:

FEI Number: 20-5915672 **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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: DAVIS, RICHARD
Address: 1235 CLARK ST, 1ST FLOOR
City-St-Zip: ARLINGTON, VA 22202

Title: STD ( ) Delete
Name: SCHMUCKLER, JOSEPH
Address: 1235 CLARK ST, 1ST FLOOR
City-St-Zip: ARLINGTON, VA 22202

Title: D ( ) Delete
Name: EUDY, CARLA
Address: 1235 CLARK ST, 1ST FLOOR
City-St-Zip: ARLINGTON, VA 22202

Title: D (X) Delete
Name: NELSON, TERRY
Address: 1235 CLARK ST, 1ST FLOOR
City-St-Zip: ARLINGTON, VA 22202

Title: D (X) Delete
Name: WEAVER, JOHN
Address: 1235 CLARK ST, 1ST FLOOR
City-St-Zip: ARLINGTON, VA 22202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: DAVIS, RICHARD
Address: 1235 CLARK ST, M FLOOR
City-St-Zip: ARLINGTON, VA 22202

Title: STD (X) Change ( ) Addition
Name: SCHMUCKLER, JOSEPH
Address: 1235 CLARK ST, M FLOOR
City-St-Zip: ARLINGTON, VA 22202

Title: D (X) Change ( ) Addition
Name: EUDY, CARLA
Address: 1235 CLARK ST, M FLOOR
City-St-Zip: ARLINGTON, VA 22202

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD DAVIS PD 03/13/2008

Electronic Signature of Signing Officer or Director — Date